APPENDICES

Milestone Forms (University & Departmental Evaluation Forms) **
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  Research Project Form
  Written Empirical Evaluation Form
  Empirical Defense Evaluation Form
  Non-Thesis Master's Examination Card
  Doctoral Preliminary Examination Report
  Major Area Form
  Major Area Written Paper Evaluation Form
  Major Area Paper Oral Defense Evaluation Form
  Dissertation Project Approval Form
  Department Defense Announcement
  Written Dissertation Evaluation Form
  Dissertation Final Examination Evaluation Form

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Student Mid-Year Progress Report
Mentor's Review of Student's Research Skills
Comments on Faculty Mentoring
Mid-Year Practicum Evaluation
End-of-Year Practicum Evaluation
Student Evaluation of Clinical Practicum Experience
Graduate Course Evaluation
Graduate Student Survey
Practicum Hours Record
Conference Travel Applications (Claire Hamilton and Graduate School)
Guide for the Electronic Submission of Thesis and Dissertation

** Please See PAM SMITH (Room 246) FOR A COPY OF ALL MILESTONE FORMS
COMMITTEE APPROVAL FORM

Submit to:  Associate Dean
            Graduate School
            127 Allen Building
            Duke University

Approval is requested for the following Advisory Committee for:

Students Name: ____________________________

Department Name: Psychology & Neuroscience

for the students:  □ Ph.D. preliminary examination  □ Ph.D. final examination
                   □ A.M./M.S. examination

Professor's Full Name  Rank/Title  Department

(Committee Chair)

REQUICKED – MINOR AREA REPRESENTATIVE

If the advisor and chair are not the same person, please identify the advisor with an *

The above listing is (please check one):

□ original committee request.
□ change in the student’s previously approved committee.

We understand that members of a graduate student's advisory committee must be approved for graduate instruction or graduate faculty, and that any committee member now on the faculty of another institution should be a member of that institution's graduate faculty. The institution's name is listed for any non-Duke member.

Submitted by:

______________________________ Date: _______________________

Director of Graduate Studies

Approved by:

______________________________ Date: _______________________

Associate Dean, Graduate School
RESEARCH PROJECT FORM

EMPIRICAL

Student:

Students in the Clinical Program are required to complete a research project during their first two years of study. This project is to be reported in concise written form akin to a journal article and be submitted for publication if appropriate. It is required that a three-person faculty research supervision committee approves this report by the end of the Spring semester in year two (2). The committee is to meet with the student by this deadline to provide the student with the opportunity to discuss their completed project and their plans for future research. This meeting is not designed as an examination. The research report will be evaluated on its own merit. Each member of the three-person committee should be consulted at an earlier point regarding the formulation of the research project.

Please have each member of your three-person committee indicate that they have been consulted regarding the formulation of your research projects.

Please obtain the endorsement of each member of your committee who feels you have completed an acceptable research project. This can be done either before or at the meeting of your committee, to be held at the end of the Spring semester of the second year.

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Does this paper pass the student on to the Empirical Defense (A score of 3 is required to pass).
Empirical Defense Evaluation Form  
Department of Psychology & Neuroscience  
Duke University

**Evaluative Dimension:**

1. Quality and style of response to questions  
   Comment:  
   1  2  3  4  5  NA

2. Breadth of knowledge on related areas of research  
   Comment:  
   1  2  3  4  5  NA

3. Demonstrated knowledge of methodological approach  
   Comment:  
   1  2  3  4  5  NA

4. Ability to defend/discuss/highlight key aspects of the conceptual foundation and methods of the research  
   Comment:  
   1  2  3  4  5  NA

5. Ability to defend research findings and potential limitations  
   Comment:  
   1  2  3  4  5  NA

6. Ability to identify areas for future research  
   Comment:  
   1  2  3  4  5  NA
NON-THESIS MASTER'S EXAMINATION CARD

Student ID: ___________________  Graduation Term: ________________

Candidate's Name: ___________________  Degree: ___________________

Examination Date: ________________  Department: ___________________

(Exam date required)

Academic Exercise completed in lieu of thesis: ____________________________

______________________________

Committee Action (circle one)  PASS  FAIL

______________________________

Committee Signatures: ___________________  Chair ___________________

______________________________

This Masters Candidate has met all departmental requirements for the Non-Thesis Masters Degree.

______________________________

Signature: Director of Graduate Studies
DOCTORAL PRELIMINARY EXAMINATION REPORT

Student Name: ____________________________________________________________

Department Name: ________________________________________________________

Action of Committee: ___________________________ Date: _______________
(If the committee fails the student but grants a re-examination, the bottom portion of this form must also be completed.)

Please Print Name: ___________________________ Signature: ________________
_________________________________________________________
_________________________________________________________
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DGS Signature: ___________________________ Date: _______________

When the committee action is to pass, any committee member who votes to fail should sign this report as a complete record of the examination and note the negative vote beside the signature.

In case of failure, the student may be granted one re-examination upon the recommendation of the Committee and with the approval of the Dean of the Graduate School. The date set must be not earlier than three months after the first examination.

The Committee recommends that ___________________________ be allowed to take a re-examination in the above field.

_________________________________________________________
Chair

_________________________________________________________
_________________________________________________________
_________________________________________________________
_________________________________________________________
_________________________________________________________

(The Chairman of the examining committee, who will usually be the person in charge of the student's research, should take the initiative in reporting the success or failure of the student on his preliminary examination.)
MAJOR AREA FORM

The primary basis for qualification for candidacy is a conceptual and review paper of a Psychological Bulletin variety, which reflects mastery of the ideas and accumulated knowledge in some delimited field of inquiry. The preliminary exam is based on this product, and thus tests the student's expertise in his or her major area.

The student must consult with each member of a four-person committee for the purpose of formulating an area. The paper and exam (defense) must be completed by the end of the student's third year.

Please describe your major area paper below, and obtain the endorsement of each member of your four-person committee. This will ensure that you and your committee members share a common understanding of the area of study you are expected to master.

ABSTRACT
(You can staple abstract if you need more room to describe)

Student's Name

Date

(Signatures on back)
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<td>3. Balance/ fairness in coverage of alternative views</td>
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*Does this paper pass the student on to the oral defense? (A score of 3 is required to pass.)*

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*Does the paper meet the minimum length standard?  YES  NO*

*Is this paper ready for submission for publication, as is or with achievable revision?*

*YES  NO*
Major Area Paper Oral Defense Evaluation Form
Department of Psychology & Neuroscience Duke University

Evaluative Dimension:
1. Quality and professionalism of the presentation
   1 2 3 4 5 NA
   Comment:

2. Quality and style of response to questions
   1 2 3 4 5 NA
   Comment:

3. Breadth of knowledge on related areas
   1 2 3 4 5 NA
   Comment:

4. Demonstrated knowledge of studies reviewed
   1 2 3 4 5 NA
   Comment:

5. Ability to defend/discuss/highlight key aspects of the conceptual foundation and methods of the research
   1 2 3 4 5 NA
   Comment:

6. Ability to defend their integration of the literature/novel ideas presented in their paper
   1 2 3 4 5 NA
   Comment:

7. Ability to identify/defend ideas for future research that emerge from the MAP
   1 2 3 4 5 NA
   Comment:
DISSERTATION PROJECT APPROVAL FORM

The doctoral committee of ____________________________ met (Student’s Name) ____________________________ in order to review the thesis plan. The committee (Date) reached the following decision (indicate decision with an “X”):

PROJECT APPROVED: ____________

PROJECT APPROVED WITH QUALIFICATIONS: ____________

Specify qualifications: ____________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

PROJECT DISCOURAGED: ____________

Chair (Print) ____________________________________________________________ (Signature) ___________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

______________________________________________________________________________

Minor Area Representative ________________________________________________________
DEPARTMENTAL DEFENSE ANNOUNCEMENT

The final examination of __________________________
Name of student

for the Ph.D. degree in __________________________
Department

will be held on ________________________________
Time of day, month, date, year

in ________________________________
Building, room number

The TITLE of the dissertation is:

The Committee to conduct the examination consists of:

_________________________________________Chair (Primary mentor)

_________________________________________Administrative Chair

_________________________________________

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Director of Graduate Studies
**Written Dissertation Evaluation Form**  
**Department of Psychology & Neuroscience**  
**Duke University**

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Does this paper pass the student on to the Final Examination? (A score of 3 is required to pass.)

1 2 3 4 5
# Dissertation Final Examination Evaluation Form

**Department of Psychology & Neuroscience**

**Duke University**

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<td>2. Breadth of knowledge on related areas of research</td>
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Name ________________________________ Date / Semester ____________________

Course Requirements (a check mark indicates requirement completed):

Adult Psychopathology ___
Statistics I (ANOVA) ___
Research Methods ___
Personality Assessment ___
Statistics II (Regression) ___
First Year Seminar/Academic and Professional Psychology ___
Intervention ___

Elective in developmental bases of behavior ___ (Course taken: ______________________)
Elective in cognitive bases of behavior ___ (Course taken: ______________________)
Elective in social bases of behavior ___ (Course taken: ______________________)
Elective in biological bases of behavior ___ (Course taken: ______________________)

Ethics ___
Diversity and Mental Health ___
Seminar in supervision/consultation (6 monthly seminars with Dr. Mauro, July to December, with interns) ___
Documentation of history and systems integration ___

Responsible Conduct of Research (RCR) (12 credits required by Graduate School) ___

Research Requirements (a check mark indicates requirement completed):
Second Year Empirical Project (due before end of second year) ___
Major Area Paper (due before end of third year) ___
Dissertation Proposal (due before September 30 of year of internship application) ___
Dissertation Defense ___

Teaching Assistantship Requirements (3 required)

__________________________
__________________________
__________________________

Practicum Hours: Intervention _______ Assessment _______ Supervision _______

Notes:
Empirical requires a three-person committee, of whom two should be from core clinical faculty.
MAP and dissertation require a four-person committee, of whom one must be a non-psychologist.
MAP committee must be approved two months prior to defense of MAP.
Name ___________________________  Date / Semester __________________

**Course Requirements** (a check mark indicates requirement completed):

Adult Psychopathology __
Statistics I (ANOVA) __
Research Methods __
Personality Assessment __
Statistics II (Regression) __
First Year Seminar/Academic and Professional Psychology __
Intervention __

Elective in developmental bases of behavior __ (Course taken: ______________________)
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Diversity and Mental Health __
Seminar in supervision/consultation (6 monthly seminars with Dr. Mauro, July to December, with interns) __
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Second Year Empirical Project (due before end of second year) __
Major Area Paper (due before end of third year) __
Dissertation Proposal (due before September 30 of year of internship application) __
Dissertation Defense __

**Teaching Assistantship Requirements** (3 required)
______________________________
______________________________
______________________________

**Practicum Hours:** Intervention ______  Assessment ______  Supervision ______

**Notes:**
Empirical requires a three-person committee, of whom two should be from core clinical faculty.
MAP and dissertation require a four-person committee, of whom one must be outside of the field.
MAP committee must be approved two months prior to defense of MAP.
Graduate Student Annual Evaluation (Spring Semester, ________)

Name: ___________________________ Duke Program ID: __________

Year of Admission: ________________ # Years in Program: __________

Advanced to Doctoral Candidacy (date): ______

1. Research performance or potential (feedback provided by mentor):

Rating: Above Expectations Meets Expectations Needs Improvement

Brief narrative summary:

Plans for upcoming year:

Notable strengths of student:

Areas of difficulty, if any; suggested strategy for improvement:

Total Number Presentations: _____ Total Number Publications: _____

Published (check if yes): Empirical _____ MAP _____ Dissertation: ______

2. Practicum performance (feedback from practicum team leader):

Rating: Above Expectations Meets Expectations Needs Improvement

Rotations completed:

Plans for upcoming year:

Notable strengths of student: See end of year clinical supervisor evaluation.

Areas of difficulty, if any; suggested strategy for improvement:

Total Direct Service Hours: Treat_______ Assess: _______ Total Supervision Hours: _______

3. Coursework progress and grades (see attached checklist)

Overall Rating: Above Expectations Meets Expectations Needs Improvement

4. Ability with regard to issues of individual and cultural diversity.

Overall Rating: Above Expectations Meets Expectations Needs Improvement

5. Ability with regard to ethical issues.

Overall Rating: Above Expectations Meets Expectations Needs Improvement
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<th>Program / Departmental Checklist of Milestones</th>
<th>Date Completed</th>
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<td>MAP / Qualifying exam</td>
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<td>Required coursework</td>
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<td>Dissertation proposal</td>
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<td>Internship (date applied)</td>
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</tr>
</tbody>
</table>

Program Recommendation

Acceptable progress in Clinical Program: YES NO

Plan to remediate, if no: ________________________________________

"In good standing" in the Graduate School: YES NO

Plan to remediate, if no: ________________________________________

Continuation with support ____________________________

Continuation without support _________________________

Termination, effective ________________________________

Signatures

I have read this report and understand it (Signing does not indicate agreement with evaluation).

______________________________  __________________________
Student                           Date

This report reflects the evaluation of the student mentor and DCT following review of the student at the Clinical Program Faculty meeting review.

______________________________  __________________________
Director of Clinical Training     Date
# STUDENT MID-YEAR PROGRESS REPORT

## Student

## Mentor:

## Date:

### Research Involvement
- Comments
- Empirical
- MAP
- Proposal

### Teaching Assistant Work
- Comments

### Clinical Practicum Performance
- Comments

### Course Work
- Comments
Mentor’s Review of Student’s Research Skills

Student ___________________________ Date Completed ____________

<table>
<thead>
<tr>
<th>Poor</th>
<th>Below Average</th>
<th>Average</th>
<th>Above Average</th>
<th>Excellent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Needs highly structured training to improve skills</td>
<td>The trainee is as skillful in this area as the average trainee at this point</td>
<td></td>
<td></td>
<td>Has remarkable skills and outstanding performance</td>
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</tbody>
</table>

How well does this student:
- Identify a research problem or question
- Conduct a literature review
- Develop a research protocol, e.g., an IRB protocol
- Recruit subjects
- Gather data
- Analyze data
- Understand statistical procedures
- Write and present research findings
- Write grant applications
- Understand the journal review process
- Understand the study section review process
- Cope with frustration or rejection
- Problem-solve during the research process

We reviewed these skills and discussed directions for further research training.

_________________________________________  ___________________________________________
Student                                           Mentor
COMMENTS ON FACULTY MENTORING

Faculty interact with students in many ways. The relationships between student and adviser are varied, complicated and subtle. Among the most important is mentoring, a relationship of continuing guidance and role modeling that transcends classroom teaching or single-issue advising. The purpose of this comment form is to encourage better mentoring and to provide a means for graduate students to communicate their assessment of the effectiveness of faculty mentors.

On this form we ask you to comment on your mentoring experiences with the faculty of this department. The intention is both to provide faculty with constructive feedback on what they are doing well and on what needs improvement. The procedure is for student and mentor to meet once per year, in the Spring semester to discuss the student’s experience of mentoring in each of the areas covered on the form, then for the student to complete the form and submit it to the Director of Clinical Training.

In filling out this form, you are asked to comment frankly on your mentor. Leave blank any spaces that do not apply to you. In asking you to be frank, we remind you that good mentoring is not the same thing as leniency or permissiveness. Be as objective as you can in considering how well a faculty member has helped to prepare you for a productive and satisfying career.
Faculty Member: 

Student: 

Intellectual Growth and Development

• Encourages my imagination and creativity
• Encourages my inventiveness including the identification of new research topics, discovery of new techniques, development of new apparatus and patentable inventions
• Helps me develop my capacity for logical reasoning including abstract and theoretical reasoning as well as my ability to draw logical inferences from observational and experimental data
• Helps me to be critical and objective concerning my own results and ideas

Comments:

Research

• Shows me how to do original research
• Takes steps to improve my ability to conceive explanatory hypotheses and design critical tests of such hypotheses
• Takes steps to improve my observation of natural, technical, or social phenomena
• Provides constructive feedback on my experimental designs
• Provides thoughtful advice on my research

Comments:

Professional Career Development

• Provides counsel for important professional decisions
• Is instrumental in building my professional networks
• Provides guidance on professional ethics
• Promotes collegial relationships with professional community
• Helps me to envision a career plan
• Provides guidance on finding a job or postdoctoral appointment
• Provides guidance on a full range of career options or a referral

Comments:
Academic Guidance

• Provides sound advice in planning my courses and curriculum relative to my career goals
• Provides sound advice on my academic goals relative to my career plans
• Discusses pitfalls in my academic growth

Comments:

Skill Development

• Takes steps to develop my planning and organization, communication, teaching, and team-leadership skills
• Provides constructive feedback on presentation skills
• Provides constructive feedback on writing skills

Comments:

Personal Communication

• Listens carefully to my concerns
• Keeps in touch on my progress
• Takes into account gender, ethnic, and cultural issues
• Takes a respectful attitude toward my interests and work
• Does not abuse power—does not take advantage of my time and abilities
• Provides feedback in timely fashion

Comments

Signatures: We have discussed each of the areas on this form.

Faculty Member:

Student:

Date:
**General comments on institutional leadership:** Please comment on the mentoring and guidance activities of this institution at the university, college, and departmental level.

A. Do you think the institution is providing you with the programs and activities that you need for professional career and skill development, as well as academic and research guidance?

B. What mentoring activities have you found useful? Should they be continued?

C. What mentoring activities have not been useful? How could they be improved?

D. What new mentoring activities do you believe we should undertake?

E. How has your mentoring experience encouraged you to be a mentor?

**Mentoring Comment Form:** Do you think this comment form is a good idea? How could it be improved?
Mid-Year Practicum Evaluation

Practicum Student Name ___________________________ Supervisor ___________________________
Rotation ___________________________ Date of Evaluation ___________________________

What Psychological Services has the student performed on this rotation? Please list all that apply within the general areas of psychological assessment, intervention, and consultation:

_________________________________________________________

I. Quantitative Ratings of Student Progress

Please rate the student’s skill & progress across the domains of professional functioning listed below since the beginning of the year. In the space beneath each section, please provide written comments if needed to clarify your ratings. Please use the following 5 point scale in making your ratings. If an item is not applicable, please rate NA. It is expected that most ratings for most students will be a “3”. If the student exhibited skills that are higher or lower than that – please explain in the comments section.

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<td>The trainee is as skillful in this area as the average trainee at this point</td>
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Ethical and Professional Conduct

1. __________ Knowledge and adherence to professional ethics (e.g., APA Ethical Guidelines)
2. __________ Demonstrates motivation and initiative in terms of professional responsibilities
3. __________ Shows a positive, professional attitude toward work assignments
4. __________ Seeks and accepts supervision
5. __________ Presents self to others in a professional manner (e.g., speech, dress, demeanor)
6. __________ Completes assignments in a timely manner
7. __________ Organizes time and work schedule effectively
8. __________ Develops good relationships with other professionals/peers
9. __________ Makes appropriate and timely documentation.

Comments:
Consultation and Supervision

1. _________ Develops understanding of consultation/evaluation model used on this rotation
2. _________ Discerns consultation questions
3. _________ Develops formulation of the case/situation
4. _________ Gives feedback to referral source
5. _________ Participates appropriately in ward/unit activities
6. _________ Shows understanding of models or principles of supervision
7. _________ Supervises others effectively in hierarchical supervision

Comments:

Assessment and Diagnosis

1. _________ Discerns referral question
2. _________ Selects appropriate, empirically supported (when available) assessment tools to answer referral questions
3. _________ Systematically collects information relevant to referral questions
4. _________ Administers interview/tests competently
5. _________ Demonstrates competency in scoring and interpretation
6. _________ Writes coherent report which addresses major issues, referral questions, and makes appropriate recommendations
7. _________ Demonstrates knowledge and appropriate application of DSM-IV diagnosis in assessment and treatment

Comments:

Intervention (e.g. individual; group; family therapy; behavior therapy; biofeedback; other (please specify in note space below))

1. _________ Displays appropriate relationship skills (Rapport, warmth, empathy, etc.)
2. _________ Sets appropriate operationally defined treatment goals
3. _________ Selects appropriate empirically supported (when available & clinically indicated) intervention
4. _________ Implements intervention with appropriate technical skill
5. _________ Tracks and manages therapy process
6. _________ Takes responsibility for case management
7. _________ Manages crisis and emergencies appropriately

Comments:
Knowledge and abilities in strategies of scholarly inquiry and application of principles and knowledge to practice

1. Demonstrates knowledge of scientific literature relevant to the rotation
2. Knowledge of empirically supported procedures relevant to the rotation
3. If necessary to update knowledge, reads literature on subjects relevant to the rotation
4. Applies knowledge from literature to practice

Comments:

Shows Evidence of integration of science and practice

1. Systematically applies knowledge in relevant scientific domains to areas of practice (assessment, intervention, consultation, etc.)
2. Collects information in a systematic fashion.
3. Communicates information in a clear and, if relevant, operational fashion.
4. Approaches practice using processes of critical thinking, hypothesis testing, and other elements of the scientific method.

Comments:

Cultural and Individual Diversity

1. Provision of psychological services to individuals from various backgrounds (ethnic, religious, cultural, SES) in a manner that is sensitive to such issues
2. Shows sensitivity to gender issues in provision of services
3. Shows sensitivity to gay/lesbian issues in provision of services
4. Aware of own reaction to clients from various background

Comments:
Proficiency with Interviews
1. ___________ Unstructured Clinical Interview
2. ___________ Semi-Structured Diagnostic Interview (Please specify)
   __ SCID
   __ K-SADS
   __ ADIS
   __ Other (Please list)

Proficiency with Major Assessment Methods (Check One)
1. ___________ None
2. ___________ Beginning Level
3. ___________ Pre-Internship Level
4. ___________ Ready for Internship Level
Comments:

Proficiency with Personality Tests
1. ___________ MMPI-2
2. ___________ MMPI-A
3. ___________ Thematic Methods
4. ___________ Rorschach
5. ___________ Other (Please specify)
Comments:

Proficiency with Cognitive Testing
1. ___________ WAIS-III
2. ___________ WISC-IV
3. ___________ Other (Please specify)
Comments:
II. Identification of Problems
Please list clearly, problems (if any) that have been noted within any area of psychological knowledge or skill competency; ethics; professionalism or professional conduct; attention and sensitivity to issues of individual or cultural diversity. **If there are no problems, please so indicate:**

III. For All Problems Identified
Please meet with the student to discuss steps to remediate each problem (if remediable). These steps would involve corrective action that the student must take to address the problem and assistance the supervisor will provide. **Please list the remediation steps here:**

IV. Date for Review of Remediation Plan
Please designate the date when the remediation plan will be reviewed. That is, at what point will an assessment of success, failure, or need for ongoing remediation be made?

---

**I HAVE HAD AN OPPORTUNITY TO DISCUSS THIS EVALUATION WITH MY SUPERVISOR**

Student's Signature

(If Applicable:)

Supervisor's Signature

**I HAVE HAD AN OPPORTUNITY TO DISCUSS A REMEDIATION PLAN FOR ALL PROBLEMS IDENTIFIED WITH MY SUPERVISOR AND I UNDERSTAND THE CORRECTIVE ACTIONS.**

Student's Signature

Supervisor's Signature
End-of-Year Practicum Evaluation

Practicum Student Name ____________________________  Supervisor ____________________________

Rotation ____________________________  Date of Evaluation ____________________________

What Psychological Services has the student performed on this rotation? Please list all that apply within the general areas of psychological assessment, intervention, and consultation:

__________________________________________________________________________

I. Quantitative Ratings of Student Progress

Please rate the student's skill & progress across the domains of professional functioning listed below since the beginning of the year. In the space beneath each section, please provide written comments if needed to clarify your ratings. Please use the following 5 point scale in making your ratings. If an item is not applicable, please rate NA. It is expected that most ratings for most students will be a “3”. If the student exhibited skills that are higher or lower than that – please explain in the comments section.

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Comments:
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1. __________ WAIS-III
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I HAVE HAD AN OPPORTUNITY TO DISCUSS THIS EVALUATION WITH MY SUPERVISOR

Student’s Signature

Supervisor’s Signature

(If Applicable:)

I HAVE HAD AN OPPORTUNITY TO DISCUSS A REMEDIATION PLAN FOR ALL PROBLEMS IDENTIFIED WITH MY SUPERVISOR AND I UNDERSTAND THE CORRECTIVE ACTIONS.

Student’s Signature

Supervisor’s Signature
STUDENT EVALUATION OF CLINICAL PRACTICUM EXPERIENCE

This form is for use in evaluating the department's clinical training, so that your supervisors, the Director of clinical Training and the Practicum Committee can identify aspects of this training that either may be strong or in need of improvement. Therefore, we are requesting your perspective on your clinical experiences. Please be as candid as you can, and feel free to discuss any aspect of your clinical training that has been important to you. The topics listed below are simply guidelines that we hope will stimulate feedback on your part.

Name: ____________________
Date: ____________________
Training Site: ______________
Supervisor(s): ______________

1) CASE LOAD:
   a) Over the course of the semester, how many clients have you seen?
      
      # of treatment cases  [ ]
      # of assessment cases  [ ]
      other [ ]

   b) What was the average frequency and duration of your treatment cases?
      _____ per week/month for _____ weeks/months.

   c) Were you trained in the use of any empirically validated treatment techniques?
      If yes, please describe:

   d) Did you ever feel your client load to be too large? Too small? Too complex?
      Comments:

   e) How varied was your clinical training in terms of diagnosis, cultural diversity, etc.?
Comments:

2) SUPERVISION
a) Describe your supervision:
   individual supervision  yes/no
   group supervision      yes/no
   live supervision       yes/no
   video/audiotape        yes/no
   case discussion        yes/no
   weekly                 yes/no

b) Did you have regular/consistent access to your supervisor? Was he/she available when you needed him/her?
   
   Access
   1 2 3 4 5 Consistently Available
   Erratic

c) Did you feel you received supervision that was both problem-focused and theoretical?
   Comment:

d) Did you have any didactic experiences on your rotation (e.g., weekly meetings, readings, etc.)?
   Comment:

Additional Comments: Use the space below and attach additional pages as needed for additional comments.
Graduate Course Evaluation

Instructor:              
Course Name:           
Date:                  

COURSE CHARACTERISTICS
Characterize this course using the scale below:
1 = Very Low    2 = Low    3 = Moderate    4 = High    5 = Very High

1. The amount of work/effort required. ________

2. The effectiveness of course instruction (e.g., lectures by the professor) and student-led discussion. ________

3. The intellectual stimulation of the course. ________

4. The adequacy of course materials (readings, handouts, power point presentations). ________

Comments
INSTRUCTOR CHARACTERISTICS

*Indicate the extent to which you agree with the following statements about the instructor of the course using the following scale:*

1 = Strongly Disagree  
2 = Disagree  
3 = Neutral  
4 = Agree  
5 = Strongly Agree

1. The professor was organized and prepared for class. 

2. The professor demonstrated depth and breadth of knowledge of the material.

3. The professor facilitated an atmosphere conducive to learning (e.g., stimulating discussion, generating enthusiasm for material, showing a commitment to the course and students, encouraging independent thinking, etc.). 

4. The professor used fair and appropriate methods to evaluate student performance.

Comments
STUDENT APPRAISAL OF PROGRESS:

Indicate the extent to which this course contributed to your progress on the following objectives:

1 = Not at All  2 = A Little  3 = Moderately  4 = Highly  5 = Very Highly  N/A, Not Applicable

1. Understanding fundamental concepts and principles. ______

2. Learning to apply knowledge, concepts, principles, or theories to a specific situation or problem. ______

3. Learning to analyze ideas, arguments and points of view. ______

4. Learning to synthesize and integrate knowledge. ______

5. Learning to conduct inquiry through methods of the field. ______

6. Developing skills in oral expression. ______

7. Developing writing skills. ______

8. Learning important historical references for course topics. ______

9. Learning about diversity issues relevant to the course. ______

Comments
# Biographical Information

**Graduate Student Survey**

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<p>| <strong>PROFESSIONAL ASSOCIATION:</strong> (please list the assoc. name if you are a member) |</p>
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<th>Title</th>
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<td>Advisor:</td>
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Enter Full Reference for your publication &/or presentation. Do not use hard-returns.

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Your Name:
Matriculation year:
Advisor:

General career goals at this point in your professional & scientific development (current students):

Critique of program (current students):
(what has been good about the program so far, and what has been not-so-good, in the way of courses, mentoring, practicum, other aspects?)

Site name, position and hire date of first job after graduation (for graduates):

Site name, position and hire date of current job, if different (for graduates):

Critique of program (for graduates):
(what was good about the program, and what was not-so-good, in the way of courses, mentoring, practicum, other aspects?)
| Completed the supervision series with | Yes | No |
| Completed 12 RCR hours | Yes | No |
| **Total Practicum Hours to Date:** | Hours |
| Treatment/Intervention Assessment |  |
| Supervision |  |
| Total Number of Publications |  |
| Total Number of Presentations |  |
| **Empirical Published** | Yes | No | N/A |
| **MAP Published** | Yes | No | N/A |
| Dissertation Published | Yes | No | N/A |
### 1. Intervention & Assessment Experience

**a. Individual Therapy**
- Older Adults (65+)
- Adults (18-64)
- Adolescents (13-17)
- School-Age (5-12)
- Pre-School Age (3-5)
- Infants/Toddlers (0-2)

**b. Career Counseling**
- Adults
- Adolescents

**c. Group Therapy**
- Adults
- Adolescents (13-17)
- Children (12 and under)

**d. Family Therapy**

**e. Couples Therapy**

**f. School Counseling Interventions**
- Consultation
- Direct Intervention
- Other

**g. Other Psychological Interventions**
- Sports Psych/Performance Enhancement
- Medical/Health-Related
- Intake Interview/Structured Interview
- Substance Abuse Interventions
- Other Interventions

**h. Psychological Assessment Experience**
- Psychodiagnostic test administration
- Neuropsychological assessment

**i. Other Psych Experience (1-5)**
- Supervision of other students
- Program Development/Outreach
- Outcome Assessment of Programs
- Other

#### Total Intervention Experience (in hours)

#### 2. Support Activities

#### 3. Supervision Received

**a. Individual**

**b. Group**

**c. Peer**

#### Total Supervision Sched (in hours)

#### Total ARCF Hours (in hours)

### 5. Treatment Settings

**1. Child Guidance Clinic**

**2. Community Mental Health Center**

**3. Department Clinic**

**4. Forensic/Justice setting (e.g., jail, prison)**

**5. Inpatient Hospital**

**6. Military**

**7. Outpatient Medical/Psychiatric Clinic & Hospital**

**8. University Counseling Center**

**9. Schools**

#### Total Treatment Setting Hours
### 6. Other Information

#### 1. Race/Ethnicity
- b. Asian-American/Asian Origin/Pacific Islander
- c. Latino-a/Hispanic
- d. American Indian/Alaska Native/Aboriginal
- e. European Origin/White
- f. Bi-racial/Multi-racial

#### 2. Sexual Orientation
- a. Heterosexual
- b. Gay
- c. Lesbian
- d. Bisexual

#### 3. Gender
- a. Male
- b. Female
- c. Transgendered

#### 4. Disabilities
- a. Physical/Orthopedic Disability
- b. Blind/Visually Impaired
- c. Deaf/Hard of Hearing
- d. Learning/Cognitive Disability
- e. Developmental Disability
- f. Serious Mental Illness
- g. Other

### 3. Integrated Reports - NUMBER OF REPORTS

- a. Adults
- b. Children/Adolescents
Travel Award Forms

Claire Hamilton Conference Travel Award
Graduate School Conference Travel Fellowship
Psychology and Neuroscience
Claire Hamilton Graduate Studies
Conference Travel Award

The Department of Psychology and Neuroscience is pleased to offer graduate student travel support. The funds for this award come from a generous endowment from the family of Claire Hamilton in honor of Claire's memory.

ELIGIBLE:
- ONLY to 1st, 2nd, and 3rd year students whether presenting or not. (Pre-MAP)
- Students can receive this award only once per year.

AWARD AMOUNT:
- $250

Award used for:
- Registration fee
- Travel expense (all airfares will require a boarding pass)
- Hotel
- $40 (maximum) per day food allowance
  (receipts are required)

Submit application to:

Peggy Morrell
227 Soc/Psych Building
Box 90086
Psychology and Neuroscience
Claire Hamilton Graduate Studies Conference Travel Award Application

Application Procedure: The application must be complete and submitted at least 45 days prior to the date of the conference. No award will be granted retroactively. The application must be signed by the student’s advisor, student, and DGS. The application form must also be accompanied by a one page letter of intent with relevant details of the conference, and if you are presenting a paper or poster, a brief abstract of the paper or poster to be presented at the conference.

Eligibility: Any registered full time graduate student enrolled in Psychology and Neuroscience. Students are limited to one conference travel award per fiscal year (July 1, -June 30). For summer conferences, students must have been registered for the previous spring semester. NO EXCEPTIONS WILL BE MADE. Students who have completed their MAP should apply to the Graduate School and complete this application AS WELL as the Grad School’s travel application.

Terms of the Award: The Department of Psychology and Neuroscience will provide up to $250 of the cost of registration fees, primary travel, lodging, and meals (up to $40 per day). The maximum to be paid by the department is $250.

Reimbursement: Save all original expense receipts including meals. When you return from your trip, submit a completed Travel Expense Voucher to Peggy Morrell for signatures. The Travel Expense Voucher must be submitted no later than one month from the date of the conference. If you need an advance on this award, please submit a completed Travel Advance Form to Peggy Morrell for approval and signatures.

Name________________________________________NET ID#_____________Phone #_____________________

Conference Title:______________________________________________________________

Conference location:____________________________Conference dates:______________

Details of Expenses:
Registration Fee: ___________________________Type: _______________(air,auto,bus,etc)
Primary Travel Expense:______________________ (max not to exceed $40 per day)
Food per day:______________________________
Lodging:________________________________
TOTAL:________________________________

Applicant Signature:________________________Date:________________________

Any portion of this travel to be charged to a procurement card?
If yes:
Whose card: ______________________________________
$________________________
for what purpose: ___________ (i.e., registration, flight)
Fund code to pay for the charge on p-card: ____________________________ (actual 7 digits or name of grant)

Are you currently supported by this faculty member: YES/NO
FACULTY ADVISOR ENDORSEMENT:

________________________________________ Date: __________________________

DGS Approval: ____________________________ Date: __________________________
GUIDELINES
FOR CONFERENCE TRAVEL APPLICATIONS

The Graduate School will provide 70% of up to $714.29 ($500.00) of the students' registration fee, the primary transportation to and from the conference, food for 4 days (not to exceed $25.00 per day), and lodging for 3 nights. However, the final amount is not determined until the Graduate School receives a Travel Expense Voucher from the department with attached receipts.

1) Conference Registration Fee - The Graduate School will pay for 70% of your registration fee to attend the conference. Your department agrees to pay the remaining 30%.

2) Primary Travel - The Graduate School will only cover 70% of the cost for the major means of transportation to and from the conference. Your department agrees to pay the remaining 30%. Taxi's, shuttles, etc. are not included as primary travel.

3) Lodging - The Graduate School will only cover 70% of the cost for 3 nights of lodging, even if your conference is longer than that. If, by staying over a Saturday, your airfare is reduced by more than the cost of an additional night's lodging, we will consider covering an additional day, but only if this is discussed in detail and requested in your letter of intent. Your department agrees to pay the remaining 30%.

4) Food - The Graduate School will only provide for 4 days of food at a maximum of $25 per day. Save receipts and keep a meal log. If there is a banquet at the conference, the same $25/day rule still applies. Your department agrees to pay the remaining 30%.

5) Other Awards - If you receive a non-departmental award for the conference, you must list it and subtract it from the TOTAL line.

The Graduate School expects students to find the most reasonable and economical lodging and transportation. Call around and get price quotes. Do not forget to ask about any taxes that may be charged. If you can, share a room instead of getting a single.

Summer Travel - Students do not have to be registered for summer to receive a Conference Travel Grant in the summer. However, you do need to have been registered during the spring prior to the conference and be registered for the upcoming fall to be eligible for summer travel.
Conference Travel Award Application

The Graduate School will provide 70% of up to $750.00 ($525) for domestic and up to $1000.00 ($700) for international travel, which includes the students’ registration fee, the primary transportation to and from the conference, food for 4 days (not to exceed $25.00 per day), and lodging for 3 nights. However, the final amount is not determined until the Graduate School receives a Travel Expense Form from the department with attached receipts.

1) Conference Registration Fee - The Graduate School will pay 70% of your registration fee to attend the conference. Your department agrees to pay the remaining 30%.

2) Primary Travel - The Graduate School will only cover 70% of the cost for the **primary means of transportation** to and from the conference. Your department agrees to pay the remaining 30%. Taxi’s, shuttles, etc. are NOT included as primary travel.

3) Lodging - The Graduate School will only cover 70% of the cost for **3 nights of lodging**, even if your conference is longer than that. If, by staying over on a Saturday, your airfare is reduced by more than the cost of an additional nights lodging, we will consider covering an additional day, but ONLY if this is discussed in detail and requested in your letter of intent. Your department agrees to pay the remaining 30%.

4) Food - The Graduate School will only provide for **4 days of food** at a maximum of $25 per day. Save receipts and keep a meal log. If there is a banquet at the conference, the same $25/day rule still applies. Your department agrees to pay the remaining 30%.

5) Other Awards - If you receive a non-departmental award for the conference, you must list it and subtract it from the TOTAL line.

The Graduate School expects students to find the most reasonable and economical lodging and transportation. Call around and get price quotes. Do not forget to ask about any taxes that may be charged. If you can, share a room instead of getting a single.

**International Travel:** International Travelers must now register their travel plans in advance with the Duke Travel Registry. Please review the Travel Policy, complete the Graduate & Professional Students Travel Registration form at [https://travel.duke.edu](https://travel.duke.edu) and have your flight, destination and passport information available before you log in. Per the Duke Travel Policy, this process will speed assistance or evacuation in the event of an emergency.

**Summer Travel** - Students do not have to be registered for summer to receive a Conference Travel Award in the summer. However, you do need to have been **registered during the spring prior** to the conference and be **registered for the upcoming fall** to be eligible for summer travel.
CONFERENCE TRAVEL AWARD APPLICATION

AWARD APPLICATION PROCEDURE: The application must be complete and submitted prior to the date of the conference. No awards will be granted retroactively. The application must be signed by the Director of Graduate Studies in your department, which also indicates the department’s commitment to provide support of 30% of the total expenses. The application form must also be accompanied by a brief letter of intent (with relevant details of the trip) and a brief abstract of the paper or poster to be presented at the conference. Once complete submit all documentation to your department administrator or DGSA for processing. The forms will be electronically submitted to The Graduate School through ImageNow. Link to instructions: https://gradschool.duke.edu/sites/default/files/documents/conference_travel_upload_process.pdf.

ELIGIBILITY: Any graduate student enrolled in a Ph.D. granting program who has passed all parts of the Preliminary exam, submitted the preliminary results to Academic Affairs, and is actively participating in a conference (i.e., presenting a paper or poster, or leading a discussion) is eligible. Students are limited to one conference travel award per fiscal year (July 1-June 30). Students attending conferences during the academic year must be registered at the time of the conference. For summer conferences, students must be registered for the upcoming fall semester, and have been registered for the previous spring semester. No exceptions will be made.

TERMS OF THE AWARD: The Graduate School will provide 70% of the total expense for registration fees, primary travel, three nights lodging, and meals for four days (up to $25 a day). The maximum amount to be paid by The Graduate School is $25.00 for domestic and $700.00 for international travel. The applicant’s department is responsible for providing 30% of the total expense for registration fees, primary travel, three nights lodging, and meals for four days (up to $25 a day). If the student has received a non-departmental grant for travel, this amount must be deducted from the request. If the applicant’s department cannot commit to providing 30% support, the award application will not be approved by The Graduate School.

REIMBURSEMENT: Save all original expense receipts. When you return from your trip, you may submit all receipts to your department for processing. The Graduate School will provide the appropriate award code and verify allocations. Your travel expenses will then be done electronically via Duke@Work travel expense form at: http://www.hr.duke.edu/selfservice by you or your department. The Travel Expense Form must be submitted no later than 1 month (30 days) from the date of your return from the conference. If you need an advance on this award, please submit a Travel Advance Form to the Bursar’s Office through your department.

INTERNATIONAL TRAVEL: International Travelers must now register their travel plans in advance with the Duke Travel Registry. Please review the Travel Policy, complete the Graduate & Professional Students Travel Registration form at https://travel.duke.edu and have your flight, destination and passport information available before you log in. Per the Duke Travel Policy, this process will speed assistance or evacuation in the event of an emergency.

Name: ________________________ Duke Unique ID _______ Phone #: _______
Department: __________________ Department P.O. Box: __________
Will you be registered full-time at the time of the conference? Yes ______ No ______ Date Prelim Exam Passed ______
Have you received a Conference Travel Grant in the current fiscal year? Yes ______ No ______
Title/Topic of paper you will be presenting: __________________________________________
Conference title: __________________________ Conference dates: ________________
Details of Expenses:
Registration Fee: ______________________
Primary Travel Expense: ______________ Type: __________ (Air, auto, bus, etc.)
Food per day: ________________ (max. of 4 days - not to exceed $25.00 per day)
Lodging per night: ________________ (max. of 3 nights lodging)
TOTAL: ____________________________
Other Awards: ______________________ Type: __________________________
Total Request: _______________________ Type: __________________________
Applicant Signature: __________________________ Date of Application: ________________
DEPARTMENT ENDORSEMENT: This student is endorsed by his/her department and will receive 30% of the Allowable expenses from departmental funds. Please give expected department fund code ______
Director of Graduate Studies: __________________________ Date: ________________
Guide for the
Electronic Submission
of Thesis and Dissertation

DUKE
THE GRADUATE SCHOOL

2127 Campus Drive
Durham, North Carolina 27708
www.gradschool.duke.edu

May 2015
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Summary of Steps for Electronic Submission of Thesis and Dissertation
Duke University Graduate School

1. Initial Submission:
   ☐ Apply for graduation through ACES.
   ☐ Double check your committee: submit a Committee Approval Form if your dissertation committee in ACES does not match the committee that will be present at your defense.
   ☐ Format your dissertation using the Graduate School dissertation template (available in MS Word or LaTeX) and the Guide for Electronic Submission of Dissertations, both of which are provided on the Graduate School Web site: http://gradschool.duke.edu/academics/theses-and-dissertations
   
   NOTE: The Graduate School strongly recommends all students use the dissertation templates in order to reduce the chance of serious formatting problems that could potentially delay your graduation.
   ☐ Before your initial submission, give your advisor a complete draft of your thesis or dissertation and fix any problems noted.
   ☐ Request from your advisor an Advisor Letter and from your Department DGSA a Defense Announcement (there are samples in the Guide) to be emailed to the Graduate School (with the student name as part of the subject line)-to: gradacademics@duke.edu.
   ☐ Submit your correctly formatted dissertation/thesis to UMI/ProQuest at least 2 weeks prior to your defense. Do not destroy original file from which you create the PDF, as you will need this version for revision purposes. Remember, this is your initial submission and it must be complete with correct formatting and no sections left blank-otherwise it will be rejected. Submit your dissertation/thesis at: http://dissertations2.umi.com/duke. When you receive an email containing the format changes required (if any), make an exam card appointment with the individual from whom you received the email. The appointment calendar is located at: https://examcard.gradschool.duke.edu Appointments are at the Graduate School 2127 Campus Drive.

2. Exam Card Appointment:
   ☐ Provided you have filed an “Apply for Graduation” form, submitted an Advisor Letter and Defense Announcement, and have an approved thesis/dissertation committee, you will receive your Final Examination Certificate (exam card), Non-Exclusive Distribution License, and for PhD students only, the Survey of Earned Doctorates (SED). PhD students will need to complete the Graduate School’s computer-based Exit Survey. Please refer to the Exam Card Procedure Guide for more details. http://gradschool.duke.edu/sites/default/files/documents/exam_card_procedure_guide.pdf

3. Defense:
   ☐ After defending, obtain the original signatures of your committee on: one (1) title signature page, one (1) abstract title signature page, and the Final Exam Certificate (exam card). Also, obtain the signature of your Director of Graduate Studies on your Final Exam Certificate (exam card).

4. Final Submission:
Submit revised PDF file to UMI/ProQuest. Submit what you consider to be the final version of your dissertation/thesis, taking into consideration the revisions required by the Graduate School and the revisions required by your committee. You will receive notification when the Graduate School has accepted your dissertation.

Submit the following materials to the Graduate School after your defense **(do not send through campus mail):**
- Signed Final Exam Certificate with original signatures
- Signed title signature page with original signatures
- Signed abstract title signature page with original signatures
- Completed “Survey of Earned Doctorate” (**PhD students only**)  
- Signed “Non-Exclusive Distribution License and Dissertation Availability Agreement” with original signatures (**must match the Institutional Repository selection in Proquest**)  

**NOTE:** Final submission must occur within 30 days of your defense; however, if you defend within 30 days of the semester deadline of your graduation date, you must adhere to semester deadline, and do not have 30 days to complete your final submission. Please see Graduate School website for semester deadlines:

http://gradschool.duke.edu/academics/preparing-graduate/graduation-deadlines

# Guide for the Electronic Submission of Thesis and Dissertation

## I. Apply for Graduation and Scheduling the Defense

By Applying for Graduation, you inform the Graduate School that you are planning to graduate in a given semester. Log into ACES and select “Apply for Graduation.” The Graduation list submitted to the University Marshal is generated from the “Apply for Graduation” forms. An “Apply for Graduation” form filed for one semester does not carry over to the next semester. Thus, if you file in the fall and do not defend, you must file a new form in the spring if you expect to defend during the semester. The “Apply for Graduation” form must be submitted at least one month prior to your defense and no later than January 25 for a May degree, July 1 for a September degree, and November 1 for a December degree. If your committee is not approved you will not be eligible to Apply for Graduation.

You must schedule your defense for a term in which you are enrolled and prior to the last date for the defense in the semester for which you’ve applied to graduate. You must be registered for the subsequent term if your defense takes place between terms, as defined by the first day of class and the last day of exams. All committee members must participate in your examination. Masters committees must have at least three members,
doctoral committees at least four; however, if you have more than the minimum number, they still must all participate. In rare cases, and with the Associate Dean’s prior permission, one committee member who is not the chair may be allowed to participate remotely.

II. Committee Approval Form

Your committee in ACES must match the committee that will be present at your defense, or you will not be permitted to defend. To submit a change in your original committee for approval from the Graduate School, please request a Committee Approval Form be submitted electronically on your behalf by your department DGSA.

If your Dissertation Committee remains the same as your Preliminary Exam Committee, you must email gradacademics@duke.edu to request that they change your Preliminary Exam Committee to be the Dissertation Committee.

III. Initial Submission Procedures

A. Advisor Letters and Defense Announcements
1. Prior to submitting your thesis/dissertation electronically, you are required to give your thesis or dissertation to your advisor for his or her inspection. Request a letter from your advisor that states that your thesis/dissertation is complete and ready to defend. Your advisor will send this letter to the Graduate School using the email address: gradacademics@duke.edu
2. Request a Departmental Defense Announcement to be sent from your DGSA who will also email it to gradacademics@duke.edu. (See sample Defense Announcement Form and Advisor Letter at the back of this guide). *Do not e-mail those documents to a specific person in the Graduate School use the email address.

B. UMI/ProQuest
1. Ph.D. students and Masters students doing a thesis must submit a correctly formatted, complete electronic document to UMI/ProQuest at least two weeks prior to your defense. No paper copies are accepted. Use the following web address for the initial submission of your thesis/dissertation.

   http://dissertations2.umi.com/duke

2. All manuscripts are delivered to ProQuest/UMI as PDF files. It is up to the student to create and verify the PDF file before submission. You may want to use the most up to date Adobe Acrobat to convert your document to a PDF. *Note-if you are a Mac user, you may experience conversion problems so you may want to use a PC. Everyone should check their converted document before uploading it to Proquest to make sure everything converted properly.

   An administrator within the Graduate School will be assigned to your case for initial format checking through to final acceptance of your examination documents, and will serve as your liaison with the Graduate School.

3. Your initial submission must be a complete document with all sections filled in.
Your document will be inspected by your administrator and other staff in the Graduate School for proper formatting and completeness, though not for academic merit. Blank space and placeholders are not permitted. If you do not submit a fully completed and properly formatted document, it will be rejected. Minor revisions required will be identified, with a request to revise, but substantial format revisions will result in a rejection and referral to the format guidelines. Your advisor will be copied on the rejection email from the administrator.

4. Please remember that when uploading a revised pdf to Proquest, you are not done with your submission until you click 'Submit Revisions'. A confirmation page will display, showing your submission details. If everything is correct, click the 'Submit Revisions' button. You must click the 'Submit Revisions' button on the confirmation screen for your revisions to be submitted and for your administrator to be notified by e-mail of the updates.

5. UMI/ProQuest may initially ask if you would like them to submit a copyright on your behalf. Their fee will be charged to your credit card. (Remember that you already own the copyright so this is optional.) PLEASE review the ETD (Electronic Thesis & Dissertation) Copyright Information on our web page so you can make an informed decision. http://gradschool.duke.edu/academics/theses-and-dissertations/etd-copyright-information

6. Under Publishing Settings & Copyright-the Delayed Release (Proquest) must match Institutional repository access (IR), which must match the selection on the Non-exclusive Distribution License and Thesis/Dissertation Availability Agreement form.

7. Further information about the Electronic Thesis & Dissertation (ETD) process can be found on the Graduate School website:
   http://gradschool.duke.edu/academics/theses-and-dissertations

8. Exam Card Procedure Guide which provides details on what to expect during your exam card procedure and instructions after you submit into ProQuest can be found at this link:

IV. Preparation and Formatting Guidelines for the Thesis/Dissertation

All theses/dissertations submitted to ProQuest must meet the following format guidelines:

The manuscript must be a completed document, formatted correctly, with no sections left blank.

Each chapter of your document must begin on a page of its own.

Templates are available in Microsoft Word and LaTeX that follow the formatting guidelines described in this Guide. They can be found on the Graduate School Web Site at the following location under Thesis/Dissertation Templates:
A. Title and Abstract Title Pages
1. Title of your thesis/dissertation:
   Please enter the title using Headline Capitalization, otherwise known as Title Case. Capitalize the first letter of every word except articles ("a," "an," and "the"), coordinating conjunctions (for example, "and," "or," "but," "so," "yet," and "nor"), and prepositions with fewer than four letters (like "in"). The first letters of the first and last words are always capitalized, regardless of what they are. The title should be entered exactly as you want it to appear on the final thesis/dissertation.
2. Make sure your committee members are correct by consulting your DGSA.
3. Committee member names should not have professional titles-do not put Dr., Ph.D., or M.D. before or after committee member names.
4. If committee approval form lists a different person for chair and advisor, on title and abstract title signature pages: Supervisor=Advisor and Chair remains Chair
5. If committee approval form only lists a Chair (no advisor), then Chair=Supervisor on title signature pages.
6. If committee approval form lists Co-chairs, then title pages = Co-supervisors.
7. The word "Abstract" should appear at the top of the abstract title page.
8. All dissertations & theses must have an Abstract Title Page.
9. The paragraph at the bottom of the Abstract title page should begin, "An abstract of a thesis (if you are doing a Master thesis) or "An abstract of a dissertation (if you are doing a doctoral dissertation).

B. Margins
All pages in the thesis/dissertation must be formatted:
1. With at least a 1.5 inch margin on the left
2. At least a one inch margin on the top, right side, and bottom
3. There must be at least a 1" margin beneath the bottom page number
4. All text in the thesis/dissertation, including footnotes, page numbers, tables, figures (illustrations), schemes, and figure legends, must fall within these margins

C. Typing and Spacing
All text (including the abstract) must be double-spaced —see Exceptions:
1. Except: When an entry in the Table of Contents, List of Tables, List of Figures (Illustrations), List of Schemes, and in the Reference Section is longer than one line, that entry is single-spaced within that entry
2. Except: If a chapter heading or subheading is longer than one line, that entry is single spaced within the entry
3. Except: Indented quotations should be single spaced
4. Except: Dissertation/Thesis titles and footnotes may be either single spaced or double spaced
5. Do not use italics or script fonts for the general body of the document.

D. Page Numbers
All page numbers should be placed bottom center with a 1" margin beneath
1. The Title Signature page, the Abstract Title Signature page, and the copyright page do not have page numbers, but they are counted
2. The preliminary pages are numbered with lower case Roman Numerals
3. The abstract text page begins numbering with Roman numeral “iv”
4. Begin the first page of the Introduction or Chapter 1 with Arabic number “1.” All pages are numbered consecutively from that point

E. Footnotes
All footnotes must appear at the bottom of the page
1. Footnotes should begin renumbering with 1 at the beginning of each new chapter
2. Footnotes may be continued on the next page, but must begin on the page they are cited. Endnotes will not be allowed.
3. Footnote lines should be consistent in length, approximately 2 inches and the footnote line separator should be consistent in length with the regular footnote line

F. Format for Citations, Figures, Tables
Your thesis/dissertation should follow one of the accepted formats provided by A Manual for Writers of Term Papers, Theses, and Dissertations, by Kate L. Turabian (Chicago: The University of Chicago Press).
1. If your thesis/dissertation includes tables, figures (illustrations), schemes, you must include a List of Tables, List of Figures, and List of Schemes to be placed after the Table of Contents. Note: Tables and figures must fall within the specified margins
2. Table number and captions go above the table
3. Figure number and captions go below the figure
4. When possible, the student should try to keep each figure/table all on one page with caption, inserting page breaks where necessary or they can be continuous to the next page without labeling—“continued”
5. There is no rule on font or justification of text in captions, just be consistent
6. You can either single space or double space your captions, just be consistent

G. Figures and Tables with Landscape Orientation
The top of the figure or table should be rotated toward the binding (left) edge. The caption for the Landscape Figure or Table must also be rotated; however the page number is not. The page number must appear at the bottom as if the figure were in portrait presentation

H. The Abstract
In the abstract, you must (1) present the problem of the thesis/dissertation, (2) discuss the approach, materials and methods used, (3) summarize the major findings, and (4) state the conclusions reached. Individual chapters should not have abstracts. The Abstract will be published in Dissertation Abstracts International. The abstract text page should be Roman numeral page number iv in your document.
I. The Order of Pages in a thesis/dissertation
Title Signature Page (counted but not numbered)
Abstract Title Signature Page (counted but not numbered)
Copyright Page (counted but not numbered)
Abstract (page number should be iv)
Dedication (optional/do not list this as a line item in the Table of Contents)
Table of Contents (do not list this as a line item in the Table of Contents)
List of Tables
List of Figures (illustrations)
List of Schemes (if any)
List of Abbreviations
Acknowledgements (optional)
Introduction (if used)
Research chapter(s)
Conclusions
Appendices (if any-includes supplementary figures or movies)
References, Bibliography, or Works Cited (any of these titles are correct)
Biography (PhD only)

§ Note to Art History Students: As is conventional in this discipline, all illustrations should be placed at the end of the dissertation. § (after the biography page)

Samples of the title signature page, abstract title signature page, and copyright page are included at the end of this guide.

J. Bibliography/References/Works Cited
If individual papers are included in the thesis/dissertation a single bibliography will serve the entire manuscript. The bibliography can be in the format that is appropriate for the specific discipline: APA, MLA, AMA, Chicago, etc. A bibliography after each chapter will not be accepted.
1. The bibliography or reference section is either in alphabetical order or numbered
2. The bibliography or reference section is single spaced within the reference and double spaced between references

K. The Biography (PhD only-students doing a Master Thesis do not include)
A brief biography, ordinarily not more than one page in length, is required in doctoral dissertations. The biography should appear on the very last page of your dissertation. Do not use or include a CV/resume for your biography

L. Consistency of Format. The thesis/dissertation must be formatted consistently throughout the entire manuscript. Any article that is submitted to a professional journal and is included in the thesis/dissertation must conform to the format described in this Guide.

M. Including unconventional content. If essential aspects of your research cannot
be embedded within your thesis or dissertation document, items presenting this work can be provided as a supplement. This would include video or audio recordings, which should be provided to each committee member and to the Graduate School on DVDs. It is helpful to the reader to also summarize such items in the written document, for example using a few key frames from a movie to create a figure of several panels.

N. Inclusion of Articles Submitted to a Professional Journal. Issues regarding which format to choose and the format of non-traditional sources should be resolved with your Committee. Some disciplines, mainly in the sciences, permit inclusion in the thesis/dissertation of research papers or scholarly articles published by the student. These must be properly referenced, and the student should be mindful of copyright issues pertaining to the publication. Whatever the discipline, the published work must be logically connected and integrated into the thesis/dissertation in a coherent manner. This will require adapting your publication for use in your thesis/dissertation. Binding reprints or collections of publications together is not acceptable as a thesis/dissertation in either format or concept. You must also explicitly acknowledge any contribution made by other people to the publication you are using, e.g. attribute the work of any other authors on the publication (see below).

O. Collaborative Work. Multi-authored articles may be included in the manuscript if the student's contribution to that article, and the relationship of the research described in the article to the thesis/dissertation, are made clear in the Introduction. The text of your chapters must be your own, even if the work was collaborative. It is the responsibility of the student's thesis/dissertation committee to ensure that a thesis/dissertation represents the original, individual efforts of the candidate.

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Q. Supporting Documents for Thesis/Dissertation in Electronic Format
Supporting documents that remain on paper and are to be forwarded in an 8.5 x 11
envelope include:

1. Reprint permission letters, if required
2. Third-party software licenses, if required
3. Supplemental data, such as movies, on DVDs

Submit any hard copy supporting documents to Susan Williford at 2127 Campus Drive. She will send them to UMI at the end of the semester. A sample of the permission letter is in the back of this Guide.

V. Graduate School Exam Card Appointment

_The Exam Card Procedure Guide_ is a useful resource for information:

A. After your initial thesis/dissertation submission to UMI/ProQuest, you will receive an email from a Duke University Administrator informing you of any formatting issues. When you receive this email, you may then sign up for an exam card appointment (with the individual from whom you received the email). Please sign up for an appointment at: https://examcard.gradschool.duke.edu

B. Provided you have filed an "Apply for Graduation" form, and the Graduate School has received your Advisor letter from your Advisor and your DGSA or DGS has submitted your Department Defense Announcement, and you have an approved thesis/dissertation committee, you will receive your Final Examination Certificate, Non-Exclusive Distribution License, and for PhD only students, the Survey of Earned Doctorates (SED). PhD students will need to complete the Graduate School's computer-based Exit Survey.

C. Final Exam Certificate (card)

1. The exam card is generated in the Graduate School and will be released to you at your exam card appointment, provided all of the necessary paperwork has been received. If your thesis/dissertation committee does not match the approved committee in our system, if we have not received the defense announcement, or if we have not received the advisor letter, the Final Exam certificate will be held in the Graduate School until all items are received.

2. Take the exam card to your defense; give it to your chair because each member of your committee must sign the final examination certificate indicating the result of your final examination (pass or fail).

D. Doctoral Student Exit Survey (PhD only)

When you arrive at your appointment to pick up your Final Exam Card you will be asked to complete the 15-20 minute computer based Doctoral Student Exit Survey. This provides essential data used in accreditation activities, etc.
VI. Defense

After defending, obtain the original signatures of all members of your committee on: one (1) title signature page, one (1) abstract title signature page, and the Final Exam Certificate. Please note that neither signature page needs to be printed on a specific type of paper. Do not print front and back, have two separate pages. Also, be certain to obtain the signature of your Director of Graduate Studies on your Final Exam Certificate.

VII. Final Submission—After Your Defense

A. Submit Final Examination Certificate to the Graduate School.
B. Submit one Title Signature page with original signatures of each committee member to the Graduate School.
C. Submit one Abstract Title Signature page with original signatures of each committee member to the Graduate School.
D. Submit signed “Non-Exclusive Distribution License and Thesis/Dissertation Availability Agreement.” This document can be found on the back page of this guide however, you will be given a copy at your exam card appointment.
E. Submit “Survey of Earned Doctorates” to the Graduate School. (PhD only).
F. Within 30 days of your examination make the corrections required by the Graduate School and your Thesis/Dissertation Committee. **NOTE: If your exam is held less than 30 days before the semester deadline for completion of requirements, you must adhere to the semester deadline. If you need a period of time longer than 30 days for making changes in the thesis/dissertation, have your Director of Graduate Studies make a request for an extension of time to Associate Dean John Klingensmith john.klingensmith@duke.edu stating the reasons for the delay and specifying at what date the thesis/dissertation will be submitted. If, at the end of the semester or term, you cannot meet the submission deadline you will be required to register for the ensuing semester in which you will receive your degree.
G. Submit the revised pdf of your thesis/dissertation to UMI/ProQuest.
H. You will receive an e-mail notification when the Graduate School has accepted your final thesis/dissertation and is ready to go to Proquest.

□ NOTE: Do not submit signed Title and Abstract Title pages to UMI/ProQuest. Please use unsigned Title pages for the electronic submission. The signed Title pages should be delivered to the Graduate School at 2127 Campus Drive. Do not send them thru campus mail.

□ NOTE: About bound copies of thesis/dissertation: If your advisor or department requires a bound copy of your thesis/dissertation, or if you would like a personal copy, you can order copies through ProQuest or print out your thesis/dissertation and take it to the Textbook Store in the Bryan Center for binding. Please note that image resolution will be higher on the self-printed copy taken to the Textbook Store than on the copy ordered through ProQuest. If your thesis/dissertation contains images and/or you require a higher quality copy, the Graduate School recommends the services of the Textbook Store.
VIII. Embargo

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While notice of copyright is a legal formality, Duke University requires that you include a copyright page after the Abstract Title Signature Page and before the Abstract text stating (1) the copyright notice, (2) your full legal name, and (3) the year of submission to the Graduate School. A sample copyright page is included on page 16 of this manual. This page gives notice of your rights in your work whenever that work is reproduced in
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X. Sample Pages.

☐ Departmental Defense Announcement
☐ Advisor Letter
☐ Copyright Page
☐ Title Signature Page
☐ Abstract Title Signature Page
☐ Instructions for Copyright Permission Letters
☐ Sample Permission Letter for use of Copyrighted Material
Departmental Defense Announcement

The final examination of ____________________________ Name of student

______________________________________
Student Unique ID

for the [Ph.D./master's] degree in ____________________________ will be

Department

held on ____________________________ in

time of day, month, date, year

______________________________
(building, room number)

The Title of the [thesis/dissertation] is:

The Committee to conduct the examination consists of:

__________________________________________ Chair

__________________________________________

__________________________________________

__________________________________________

__________________________________________

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______________________________
Director of Graduate Studies
Advisor Letter

(e-mail letters to gradacademics@duke.edu)

Month, Day, Year

Graduate School Academics Office
Duke University Graduate School
2127 Campus Drive
Box 90065

To Whom it May Concern:

I have read the [thesis/dissertation] of ____________________________ and it is complete and ready to defend.

Sincerely,

______________________________
Advisor

______________________________
Department
Template: Title Signature Page

The Systematic Study of Solvent
Extraction with Acetylacetone

by
Alexis Moore Scott

Department of Chemistry
Duke University

Date: ______________________

Approved:

__________________________
Ray T. John, Supervisor

[Committee Member Name]

[Committee Member Name]

[Committee Member Name]

[Committee Member Name]

(NOTE: Signatures of all committee members must be included above.)

[Thesis/Dissertation] submitted in partial fulfillment of the requirements for the degree of [Doctor of Philosophy, Master of Science, Master of Arts] in the Department of Chemistry in the Graduate School of Duke University

2012

(Note single spacing above.)
ABSTRACT

The Systematic Study of Solvent

Extraction with Acetylacetone

by

Alexis Moore Scott

Department of Chemistry
Duke University

Date: ______________________

Approved: ______________________

Raye T. John, Supervisor

[Committee Member Name]

[Committee Member Name]

[Committee Member Name]

[Committee Member Name]

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2012

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Sample: Permission Letter to use for Copyrighted Material

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[Date]
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If these arrangements meet with your approval, please sign this letter where indicated below and return it to me in the enclosed return envelope. Thank you very much.

Sincerely,

Your name and signature

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