**Coursework Cover Sheets**

All coursework submitted via Canvas should have a cover sheet, together with the relevant assessment and feedback form copied and pasted at the start of the document.

1. The cover sheet should have your name, student number, type of assignment (critical literature review, clinical report 1, service related research project etc.) and any specific title given to your work.
2. All coursework should have the following declaration of academic integrity on the cover sheet:

*I declare that the content of this assignment is all my own work. It has not been submitted in respect of any other course/module. Where I have used the work of others it is acknowledged and referenced accordingly*.

1. All coursework which contains clinical material should have the following declaration of consent, confidentiality and anonymity on the cover sheet:

*The following case study is submitted in partial fulfilment of the requirements of University of Cork Doctor of Clinical Psychology. As such it is an academic exercise rather than a clinical report. Pseudonyms have been used throughout to protect the identity of patients, carers, staff etc.*

1. The word count for the piece of work (excluding references and appendices) should be indicated on the cover sheet.
2. Coursework should be saved as a file in the following formats:

*Coursework title.name.student number*

e.g. Critical literature review.Jones.Adam.12345

 Clinical report 1.Jones.Adam.12345

 Service related research.Jones.Adam.12345

Reflective practice assignment 1.Jones.Adam.12345

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Marking / Assessment Guidelines**

The marking scheme for *D.Clin.Psych.* courseworkis **pass / fail**. However, an indicative grade should also be awarded as below in order for trainees to gauge quality of work and monitor progress across time. A “+” or “-“ may be added to the grade to indicate if the work is at either end of the grade range. Specific competencies assessed vary across clinical reports, literature reviews, reflective practice assignments, research submissions etc. and these are outlined in the rating sheet attached to the piece of work.

|  |
| --- |
| **Excellent** |
| A | Work here will have almost all ratings in the *excellent / highly competent* category. The work will be comprehensive, accurate, incisive, critical, integrative and original. There will be little room for improvement evident. |
| **Highly Competent** |
| B | Work here will have most competence ratings between *competent – excellent / highly competent.* There may be minor dips but on the whole this work will be above-average, with no major errors or omissions. There may, however, be some room for improvement. |
| **Competent** |
| C | Most ratings here will be at least within the range of *competence* although there may be minor variations above / below this. The work should be generally satisfactory, although there may be some limitations and problems. Borderline passes will give cause for concern but should still have demonstrated a basic level of competence  |
| **Not Competent (Fail)** |
| D | Work here will not be satisfactory or competent even taking into account the developmental stage of the trainee. Ratings on most competencies will be in or towards the *not competent / very poor* range of the likert scales. Some abilities may be demonstrated, but these will be insufficient to suggest effective clinical / academic knowledge and skills. |
| **Very Poor (Fail)** |
| E | Work at this level shows very gross or significant deficiencies. Ratings on almost all competencies will be within the *not competent / very poor* range. The trainee will have demonstrated little clinical / academic competence. |

**University College Cork**

**Doctor of Clinical Psychology**

**Critical Literature Review Feedback**

|  |  |
| --- | --- |
| Trainee: |  |
| Review Title: |  |
| Date Submitted:  |  |

*The following criteria should be used in helping you to arrive at an overall mark. You may wish to rate each of these dimensions separately on the table below, but are also encouraged to give qualitative feedback overleaf to highlight strengths/weaknesses, feedback on additional points, suggest strategies for future development etc.*

|  |  |  |  |
| --- | --- | --- | --- |
| **CRITERIA** | **Excellent / Highly Competent** | **Competent** | **Not Competent / Very Poor** |
| Clarity in definition of the issue addressed |  |  |  |
| Relevant and appropriate range of literature reviewed in systematic fashion |  |  |  |
| Critical / reflective analysis and synthesis demonstrated |  |  |  |
| Demonstration of links between knowledge base and practice |  |  |  |
| Development of a coherent, well-reasoned argument |  |  |  |
| Original Thinking |  |  |  |
| Impact and quality of lay person dissemination |  |  |  |
| Clear succinct style of writing |  |  |  |
| Good Presentation, including attention to referencing, grammar, sub-sectioning etc. |  |  |  |

**GENERAL COMMENTS**

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GRADE** |  |  **PASS / FAIL** |  | **MARKER** |  |  | **DATE** |  |

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**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Clinical Report (General)**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**GENERAL COMMENTS**

*Your comments may be informed by the general assessment criteria outlined overleaf. You are also asked to rate each of the assessment dimensions on the table overleaf in addition to the comments made below. Please continue on a separate sheet if required.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GRADE** |  |  **PASS / FAIL** |  | **MARKER** |  |  | **DATE** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CRITERIA** | **Excellent /****Highly Competent** | **Competent** | **Not Competent /****Very Poor** |
| **Referral Context***(Referral objectives, service context. current status of client,)* |  |  |  |
| **Knowledge Base Links***(How well is work informed by relevant knowledge base information and professional practice guidelines)* |  |  |  |
| **Assessment***(competence in choosing, using and critically interpreting appropriate assessment methods– interviews, observations, psychometrics, others etc. – )* |  |  |  |
| **Formulation***(integration of assessment information to arrive at psychological formulation re. aetiological and maintaining processes; informed by theory etc.)* |  |  |  |
| **Intervention***(clinical interventions follow logically from formulation; interventions informed by theory; critical understanding demonstrated )* |  |  |  |
| **Outcome / Evaluation***(evidence driven and critically reflective evaluation of outcome; appropriate evaluative methods used – interview, behaviour change, rating scales etc. -)* |  |  |  |
| **Reflection***(good review of strengths and weaknesses; reformulation if appropriate; personal issues and learning experiences; use of supervision)* |  |  |  |
| **Presentation***(Clear and succinct style of writing; good structure and use of sub-sectioning; attention to referencing, grammar etc.)* |  |  |  |

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Clinical Report – Process Case Report**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**GENERAL COMMENTS**

*Your comments may be informed by the general assessment criteria outlined overleaf. You are also asked to rate each of the assessment dimensions on the table overleaf in addition to the comments made below. Please continue on a separate sheet if required.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GRADE** |  |  **PASS / FAIL** |  | **MARKER** |  |  | **DATE** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CRITERIA** | **Excellent /****Highly Competent** | **Competent** | **Not Competent /****Very Poor** |
| **Referral Context***(Referral objectives, service context. current status of client,)* |  |  |  |
| **Knowledge Base Links***(How well is work informed by relevant knowledge base information and professional practice guidelines)* |  |  |  |
| **Assessment and Formulation***(competence in choosing, using and interpreting assessment methods–arriving at coherent psychological formulation for current stage of therapy)* |  |  |  |
| **Process Analysis (1)***(analysis of therapeutic fidelity; consideration of therapeutic alliance, verbal and non-verbal communications, use and impact of reflections, interpretations, confrontations; consideration of pace, turn-taking, awareness of cultural and diversity issues etc..)* |  |  |  |
| **Process Analysis (2)***(relating interpersonal transactions within session to interpersonal processes within life / lives of clients; consideration of transference and counter-transference; boundary dynamics etc.)* |  |  |  |
| **Reflections and Conclusions***(other process analyses shown – describe in comments section - good review of strengths and weaknesses; supervision interface; clinical implications; personal issues and learning experiences)* |  |  |  |
| **Presentation***(Clear and succinct style of writing; good structure and use of sub-sectioning; attention to referencing, grammar etc.)* |  |  |  |

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Clinical Report – Single N Case Study**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**GENERAL COMMENTS**

*Your comments may be informed by the general assessment criteria outlined overleaf. You are also asked to rate each of the assessment dimensions on the table overleaf in addition to the comments made below. Please continue on a separate sheet if required.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GRADE** |  |  **PASS / FAIL** |  | **MARKER** |  |  | **DATE** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CRITERIA** | **Excellent /****Highly Competent** | **Competent** | **Not Competent /****Very Poor** |
| **Referral Context***(Referral objectives, service context. current status of client,)* |  |  |  |
| **Knowledge Base Links***(How well is work informed by relevant knowledge base information)* |  |  |  |
| **Assessment and Formulation***(competence in choosing, using and critically interpreting appropriate assessment methods–arriving at coherent psychological formulation)* |  |  |  |
| **Intervention***(clinical interventions follow logically from formulation; clear summary of course of intervention; follows therapeutic model(s)* |  |  |  |
| **Outcome / Evaluation***(competent use of single N methodology – standard / global measures as well as repeated measures; attention to both quantitative and qualitative data)* |  |  |  |
| **Critical Review***(critically assesses evidence for change due to therapeutic –v- non-specific or artefactual factors; good review of strengths and weaknesses; reformulation if appropriate; personal issues and learning experiences; use of supervision)* |  |  |  |
| **Presentation***(Clear and succinct style of writing; good structure and use of sub-sectioning; attention to referencing, grammar etc.)* |  |  |  |

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Clinical Report– Major Case Study**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**GENERAL COMMENTS**

*Your comments may be informed by the general assessment criteria outlined overleaf. You are also asked to rate each of the assessment dimensions on the table overleaf in addition to the comments made below. Please continue on a separate sheet if required.*

|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **GRADE** |  |  **PASS / FAIL** |  | **MARKER** |  |  | **DATE** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **CRITERIA** | **Excellent /****Highly Competent** | **Competent** | **Not Competent /****Very Poor** |
| **Referral Context***(Referral objectives, service context. current status of client,)* |  |  |  |
| **Knowledge Base Links***(How well is work informed by relevant knowledge base information and professional practice guidelines)* |  |  |  |
| **Assessment***(competence in choosing, using and critically interpreting appropriate assessment methods– interviews, observations, psychometrics, others etc. – )* |  |  |  |
| **Formulation***(integration of assessment information to arrive at psychological formulation re. aetiological and maintaining processes; informed by theory etc.)* |  |  |  |
| **Intervention***(clinical interventions follow logically from formulation; interventions underpinned by more than one therapeutic knowledge base; critical understanding demonstrated )* |  |  |  |
| **Outcome / Evaluation***(evidence driven and critically reflective evaluation of outcome; appropriate evaluative methods used – interview, behaviour change, rating scales etc. -)* |  |  |  |
| **Reflection***(good review of strengths and weaknesses; reformulation if appropriate; personal issues and learning experiences; use of supervision)* |  |  |  |
| **Presentation***(Clear and succinct style of writing; good structure and use of sub-sectioning; attention to referencing, grammar etc.)* |  |  |  |

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**REFLECTIVE PRACTICE ASSIGNMENT**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

*The following criteria should be used in helping you to arrive at an overall mark. You may wish to rate each of these dimensions separately on the table below, but are also encouraged to give qualitative feedback overleaf to highlight strengths/weaknesses, feedback on additional points, suggest strategies for future development etc.*

**GENERAL COMMENTS**

|  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- |
|  | **Pass / Fail** | **MARKER** |  | **DATE** |  |

|  |  |  |  |
| --- | --- | --- | --- |
| **Criteria** | **Excellent /****Highly Competent** | **Competent** | **Not Competent /****Very Poor** |
| **Critical self-awareness –** *e.g. strengths, weaknesses; how own beliefs, values, experiences etc. impact on practice both positively and negatively; how practice impacts on the self etc. awareness of parallel processes.* |  |  |  |
| **Personal development –** *e.g. evidence of personal and professional development, capacity to learn and change through reflective practice, ability to formulate future developmental needs and strategies to realise these.* |  |  |  |
| **Professional issues –** *e.g. capacity to make links between own personal development and wider professional issues and implications; ability to make links between personal issues and wider themes (e.g. diversity, supervision, leadership, parallel processes, impact of personal histories etc.) in the professional issues knowledge base.*  |  |  |  |
| **Knowledge base references –** *e.g. degree to which relevant literature is referenced to aid understanding of, and add to, points made in the report.* |  |  |  |
| **Presentation –***e.g. clarity of thought, critical style, structure, grammar, referencing etc.* |  |  |  |

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Systematic Review / Meta-Analysis Proposal: Feedback Form**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**Feedback**

Assessors are asked to consider the following aspects of the project in their comments, as deemed appropriate:

* **Background/Rationale:** Is a coherent argument made for why this question is worth pursuing, and why a systematic review or meta-analysis is appropriate?
* **Search Strategy & Selection Criteria:** Is the search strategy clear? Is it clear how the databases for primary searches have been selected? Is it clear how the search terms have been generated? Has there been engagement with a subject librarian? Are inclusion/exclusion criteria provided and explained?
* **Quality Assessment Checklists & Procedures:** Are quality assessment checklists named and justified? Who will conduct the assessment?
* **Data Extraction & Synthesis:** Is a data extraction tool provided? Is it clear whether the approach is systematic review or meta-analysis?
* **Project Timetable:** Is there a clear plan for a step-by-step process to be completed by the deadline?
* **Dissemination/Presentation:** Is the proposal clearly written? Is there a plan for dissemination of the findings?

***Assessor Decision***

Please circle ONE of the following decisions:

* + Unconditional Pass
	+ Pass with minor amendments
	+ Pass with major amendments
	+ Not Passed – Revise and Resubmit / Additional or new work required

Assessor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Systematic Review / Meta-Analysis Draft: Feedback Form**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**Feedback**

Assessors are asked to consider the following aspects of the project in their comments, as deemed appropriate:

1. **Background/Rationale:** Is a coherent argument made for why this question is worth pursuing, and why a systematic review or meta-analysis is appropriate?
2. **Search Strategy & Selection Criteria:** Is the search strategy clear? Is it clear how the databases for primary searches were selected? Is it clear how the search terms were generated? Was there engagement with a subject librarian? Are inclusion/exclusion criteria provided and explained? Is it clear how many papers were identified at each step in the process, and why papers were removed from the total? Was a second person involved in the process of paper selection?
3. **Data Extraction:** Is a data extraction tool provided? Is it appropriate?
4. **Quality Assessment Checklists & Procedures:** Is the quality assessment appropriate? Was a second person involved here?
5. **Data Synthesis:** Are the results presented in a coherent fashion. Is a good job done of critically examining the literature, and providing a good conclusion based on the evidence?
6. **Dissemination/Presentation:** Is the proposal clearly written? Is there a plan for dissemination of the findings?

Assessor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**University College Cork**

**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Service-Related Project: Feedback Form**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |
| Date Submitted:  |  |

**Feedback**

Assessors are asked to consider the following aspects of the project in their comments, as deemed appropriate:

* **Rationale/Context:** Is literature reviewed in a focused way which leads towards an explicit rationale for the project? Is the literature reviewed relevant and pertinent to the nature of the activity? Are the aims and objectives of the project clear? Do these match the activity actually involved?
* **Methods/Protocols:** Are methods and protocols justified? Are methods employed appropriate to the research question? Is attention to issues of control and validity appropriate to the aims of the study and intended generalisability of conclusions? Does the trainee evidence ethical practice and awareness in the recruitment and treatment of participants? Are protocols clear and reproducible?
* **Findings/Analysis:** Are the research findings (summary data etc.) clearly presented? Are appropriate methods of analyses employed and does the trainee seem aware of the utility and limitations of such procedures?
* **Interpretation/Discussion:** Are interpretations of findings clearly articulated? Are the limitations of the research and other interpretations acknowledged? Are appropriate clinical/professional applications considered? Are findings and interpretations related back to the stated aims or hypotheses and other work in this area?
* **Dissemination/Presentation:** Is the “story” of the research clearly written at a level and in a way which is appropriate for the intended “audience” of the research? Does structure and presentation aid comprehension and appreciation? Has attention been given to grammar, syntax, clear expression, proof-reading etc.? Is the referencing complete and in a systematic format?

***Assessor Decision***

Please circle ONE of the following decisions:

a. Unconditional Pass

b. Pass with minor amendments

c. Pass with major amendments

d. Not Passed – Revise and Resubmit / Additional or new work required

Assessor: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Trainee Research Supervision and Collaboration**

**Guidelines and Agreement**

|  |  |
| --- | --- |
| **Trainee** |  |

|  |  |
| --- | --- |
| **Lead Academic Supervisor** |  |

|  |  |
| --- | --- |
| **Second Supervisor / Clinical Supervisor / Fieldwork Collaborator(s) and Designations** |  |
|  |
|  |
|  |

1. **Overview:** This Trainee Research Agreement should be read and understood by the trainee, supervisors and collaborators at the outset of the research project. A signed copy should be submitted along with project proposal submission.
2. **Remit of the D.Clin.Psych. Research Thesis**: In summary, the major research project and systematic review should:
	1. Meet the standards for doctoral level research[[1]](#footnote-1). Whilst not as large as a PhD the two papers should report on *original* research, which *advances the knowledge base* related to Clinical psychology and be of *publishable* standard. Typically this research will address a *conceptual* issue and results should be *generalisable* – rather than only pertain to a host service for example.
	2. Foci may relate to advancing the understanding of psychological presentations, evaluating interventions or professional practices etc. Methodology may be quantitative, qualitative, or a combination thereof as appropriate to the question posed.
	3. The project may capitalise on, and become part of, an ongoing research programme in the region in which their supervisor or others are involved. However, it must be demonstrated that the trainee has made a significant independent contribution to the work.
	4. The research projects should be written up in paper format suitable for publication, with supplementary chapters as required for examination purposes.
3. **Responsibilities of the Academic Supervisor(s):** core responsibilities include to:
	1. Offer advice and guidance during the generation of the research proposal, especially with regard to issues of research design.
	2. Read through and provide written feedback on the research proposal.
	3. Advise in the preparation of ethics application(s).
	4. Meet with the trainee on a regular basis to monitor progress of work and ensure data collection is proceeding in an ethical manner. Communicate any concerns to the research coordinator.
	5. Advise and provide, or help attain, guidance on data analysis.
	6. Discuss findings and interpretations with trainee. Discuss format of write-up.
	7. Read through and provide written feedback on **one full draft** of the write-up.
	8. Provide supervisor feedback on trainee research activity.
4. **Responsibilities of Fieldwork Collaborators / Supervisors:** Clinical supervisors, or fieldwork collaborators, may participate in as many of the main supervisor activities (outlined above) as they have capacity and are willing to do. These should be agreed with the academic supervisor and trainee as appropriate. However key unique responsibilities include to:
	1. Orient the trainee to the clinical or service setting in which participants are being recruited and research conducted.
	2. Arrange for any induction, honorary contracts or other governance requirements as may be in place.
	3. Advise and support the trainee through any local or organisational ethics procedures and research governance requirements as may be in place.
	4. Be a key link person between the trainee / university and the service / organisation.
5. **Responsibilities of the trainee**: whilst supervisors and the research coordinator will advise and support the trainee in conducting and writing-up their research, final responsibility for developing and demonstrating research competence rests with the trainee. Core responsibilities include to:
	1. Generate and prepare the initial research proposal.
	2. Submit project for ethics approval, comply with any other research governance procedures as appropriate.
	3. Liaise with supervisors, collaborators and other service providers as appropriate in gaining access to participants.
	4. Collect data as agreed following proposal and ethics feedback.
	5. Assume responsibility for ensuring supervision meetings occur on a regular basis to monitor progress and produce a written record of these meetings for supervisors’ approval.
	6. Ensure any changes or modifications to the research protocol have been agreed with research supervisors.
	7. Undertake data analysis following advice and guidance from supervisors and statistical consultants as appropriate.
	8. Prepare at least one draft write-up of the project within an agreed period of time. Revise the write-up in the light of feedback.
6. **The Research coordinator and course team**: the whole supervision process, as described above, will be supported and monitored by the research coordinator and the course team.
7. **Publication and authorship**: It is expected that every effort should be made to publish / disseminate the research papers. Conducting research demands a significant investment of time, financial and human resources from participants, health and university staff and organisations, as well as the trainee. Endeavouring to publish the findings is, therefore, an ethical responsibility. The following principles operate on the DClinPsych course at UCC and should be agreed by trainee and supervisors if the project is deemed to be publishable:
	1. The trainee, academic, clinical supervisor and lead collaborators should all be authors and a paper / conference presentation should not be submitted without all parties having read the paper and agreed content. Authors should all have made a substantive contribution to the project. This might include the conceptual rationale, research design, organisation, data collection, analysis or write-up. This may be discussed by trainee and supervisors.
	2. Normally, the trainee will take the lead in preparing the paper for submission, although the supervisor(s) may make significant contributions to the write-up. In this case the trainee should normally be first author. However, if a trainee has undertaken a project which is part of a supervisor’s ongoing programme of research or a project which was conceptually driven by the supervisor, then the supervisor may wish to take the lead in submission of the journal manuscript and will be first author.
	3. Even where the trainee would be expected to take the lead in preparing a manuscript for publication, if all parties agree, a supervisor may take the lead in preparing a paper for submission. First authorship may, under these circumstances, be negotiated.
	4. A target date for submission (no later than 6 months of programme completion) should be negotiated between trainee, supervisor(s) and authoring collaborators. If this is not met by the trainee, a supervisor may take the lead in publishing the data, with the agreement of the trainee and other supervisor (s).
	5. The academic supervisor will usually be the corresponding author on any publications.
8. **Agreement**: Please indicate your agreement to follow the D.Clin.Psych. research guidelines as outlined above by signing in the relevant box below.
	1. **Trainee:**

|  |
| --- |
| **Signature: Date:** |

* 1. **Supervisors / Collaborators:**

|  |
| --- |
| **Signature(s): Date:** |

* 1. **Any Additional Notes**

|  |
| --- |
|  |

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**School of Applied Psychology**

**Doctor of Clinical Psychology**

**Research Supervision Record**

|  |  |
| --- | --- |
| **Trainee Present** |  |
| **Supervisors Present** |  |
| **Date** |  |
|  |
| **Brief summary of content**: |
| **Action points agreed *(bullet point and indicate who is to do what and by when)*:** |
|  |  |
|  |  |

|  |  |
| --- | --- |
| **Date of Next Meeting:** |  |

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**Doctor of Clinical Psychology**

**Feedback Form - Major Research Project Proposal**

|  |  |
| --- | --- |
| Trainee: |  |
| Supervisor: |  |
| Project Title: |  |

**Research Panel Decision**

Please circle ONE of the following decisions:

Pass unconditionally

Pass conditional on required revisions

Currently not passable; revise and resubmit

Not competent / passable; a different project proposal is required

**Feedback and any revisions required:**

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**Doctor of Clinical Psychology**

**Second Year Research Activity Days (February – September)**

**Trainee:**

|  |  |
| --- | --- |
| Dates Requested |  |
| Research activity to be completed |  |
| Placement impact and adjustments (days to be completed on placement, summary of any clinical impact and adjustments) |  |
| Trainee Signature |  |
| Supervisor Signature |  |
| Placement tutor signature |  |

1. These can be found at https://www.qqi.ie/Downloads/Determinations%20for%20the%20outline%20National%20Framework%20of%20Qualifications.pdf [↑](#footnote-ref-1)