

# **Couple, Marriage, and Family Therapy at**

## **Texas Tech University**

### **Mission Statement and Learning Outcomes**

Updated September 26, 2017

**T**he Couple, Marriage, and Family Therapy graduate programs at TTU provide systemic research and clinical training to prepare students for clinical licensure and scholarly achievement. TTU is known for its supportive and rigorous programs, and is one of the largest CMFT programs in the country. Our graduates have found success in a wide variety of academic, clinical and other professional settings. There are two graduate programs in CMFT at TTU: a doctoral and a master's program.

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

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

## Texas Tech University

### *Mission Statement*

“As a public research university, Texas Tech advances knowledge through innovative and creative teaching, research and scholarship. The university is dedicated to student success by preparing learners to be ethical leaders for a diverse and globally competitive workforce. The university is committed to enhancing the cultural and economic development of the state, nation and world (Approved by the Texas Tech University Board of Regents on May 14, 2010).”

## TTU MFT Doctoral Program

### *Mission Statement*

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

## TTU MFT Master’s Degree Program

### *Mission Statement*

The mission of the Texas Tech Marriage and Family Therapy Master’s Degree Program is to provide academic and clinical training to students who will function as marriage and family therapists at the highest level of scholarly and clinical competence. The master’s degree program is conceptually grounded by the scientist-practitioner model, preparing students who are capable of making unique contributions to the field of marriage and family therapy through: a) knowledgeable consumption and application of relational/systemic **research**, b) skilled and ethical delivery of relational/systemic clinical **intervention**, and 3) specialized knowledge in the relational/systemic treatment and intervention with **addictive disorders**. This training is done in a context that is supportive of **diversity**, student-faculty mentoring and support, and authenticity. The following outcomes are nested within this broad educational mission.

---

## Doctoral Program Goals, Outcomes, and Benchmarks

---

**PROGRAM GOAL:** Students will be qualified to conduct high quality relational/systemic research.

### PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:

AAMFT Code of Ethics – with special attention to:

*Standard V - Marriage and family therapists respect the dignity and protect the welfare of research participants, and are aware of applicable laws, regulations, and professional standards governing the conduct of research.*

MFT Educational Guidelines – Area XI – Research

*311.01 Course content in Area XI will provide comprehensive coverage of the critique and execution of couple, marriage, and family therapy research, statistics, research methodologies, and computer analysis and interpretation, in qualitative and quantitative research.*

*313.01 The doctoral dissertation topic will be in the field of marriage and family therapy or a closely related field (e.g., family studies, family science, human development, child development, gerontology) and include a comprehensive discussion of implications for the field of marriage and family therapy.*

### Core Competencies

*6.1.3 Conceptual - Understand the legal, ethical, and contextual issues involved in the conduct of clinical research and program evaluation.*

*6.5.1 Professional - Contribute to the development of new knowledge.*

**Student Learning Outcome:** Students will demonstrate the ability to conduct high quality relational/systemic research.

### **Benchmarks**

- 90% of students will complete the Research and Scholarship Proficiency components as part of a passing Doctoral Portfolio within 3 years of entering the program.
  - TARGET: 100% of students will complete the Research and Scholarship Proficiency components as part of a passing Doctoral Portfolio within 4 years of entering the program.
- 75% of students will successfully defend a doctoral thesis within four years of entering the program.

- TARGET: 100% of students will successfully defend a doctoral thesis within eight years of entering the program
- 80% of students will record average scores of 4 or greater for items 3 & 5 – 10 (Research Competency), on the PhD Program Exit Evaluation survey.
  - TARGET: 90% of students will record average scores of 4 or greater for items 3 & 5 – 10 (Research Competency), on the PhD Program Exit Evaluation survey.
- 80% of students will record average scores of 4 or greater for the items included in questions 22 and 23 of the Alumni Survey (Research Competency).
  - TARGET: 90% of students will record average scores of 4 (well) or greater for the items included in questions 22 and 23 of the Alumni Survey (Research Competency).
- 80% of students will receive scores of 4 (developmentally appropriate) or greater for items 1 – 7 included in questions 28 of the Internship/Stakeholder Survey (Research Competency).
  - TARGET: 90% of students will receive scores of 4 (developmentally appropriate) or greater for items 1 – 7 included in questions 28 of the Internship/Stakeholder Survey (Research Competency).

**PROGRAM GOAL:** Students will develop an advanced understanding of clinical intervention using a relational/systemic perspective.

**PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:**

AAMFT Code of Ethics – with specific attention to:

*Standard I - Marriage and family therapists advance the welfare of families and individuals and make reasonable efforts to find the appropriate balance between conflicting goals within the family system.*

*Standard II - Marriage and family therapists have unique confidentiality concerns because the client in a therapeutic relationship may be more than one person. Therapists respect and guard the confidences of each individual client.*

*Standard III - Marriage and family therapists maintain high standards of professional competence and integrity.*

MFT Educational Guidelines – Area VII, VIII

300.01 Areas VII, VIII are continuations of Areas I and II, respectively, at a

*doctoral level of sophistication.*

*101.01 Area I content will address the historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of marriage and family therapy.*

*101.02 Area I content will enable students to conceptualize and distinguish the critical epistemological issues in the profession of marriage and family therapy.*

*102.01 Area II content will address, from a relational/systemic perspective, psychopharmacology, physical health and illness, traditional psychodiagnostic categories, and the assessment, diagnosis and treatment of major mental health issues.*

*102.02 Area II content will address contemporary issues, which include but are not limited to gender, sexual functioning, sexual orientation, sex therapy, violence, addictions, and abuse, in the treatment of individuals, couples, and families from a relational/systemic perspective.*

*102.03 Area II material will address a wide variety of presenting clinical problems.*

### Core Competencies

*6.3.2 Executive - Use current MFT and other research to inform clinical practice.*

***Student Learning Outcome:*** Students will demonstrate an advanced understanding of clinical intervention using a relational/systemic perspective.

### ***Benchmarks***

- 90% of students will complete the Clinical Proficiency components as part of a passing Doctoral Portfolio within 3 years of entering the program.
  - TARGET: 100% of students will complete the Clinical Proficiency components as part of a passing Doctoral Portfolio within 4 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Self Evaluation.

- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Internship Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on the questions 12, 13, and 14 (clinical competency) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the questions 12, 13, and 14 (clinical competency) of the Program Exit Evaluation.

- 80% of students will record scores of 4 (well) or greater for the items included in questions 26 and 27 of the Alumni Survey.
  - TARGET: 90% of students will record scores of 4 (well) or greater for the items included in questions 26 and 27 of the Alumni Survey.

**PROGRAM GOAL:** Students will be prepared to teach/provide clinical supervision from a relational/systemic perspective.

**PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:**

AAMFT Code of Ethics – with specific attention to:

*Standard IV - Marriage and family therapists do not exploit the trust and dependency of students and supervisees.*

MFT Educational Guidelines – Area X

*310.01 Area X course content will be didactic and experiential, and will include current literature, research and major issues related to supervision in the profession of marriage and family therapy.*

**Student Learning Outcome:** Students will demonstrate an understanding of relational/systemic clinical supervision.

**Benchmarks**

- 90% of students will complete the Supervision Proficiency components as part of a passing Doctoral Portfolio within 3 years of entering the program.
  - TARGET: 100% of students will complete the Supervision Proficiency components as part of a passing Doctoral Portfolio within 4 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Supervision Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Supervision Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Supervision Practicum Self Evaluation.

- TARGET: 90% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Supervision Practicum Self Evaluation.
- 
- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic philosophy of supervision) of the Supervision Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic philosophy of supervision) of the Supervision Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic philosophy of supervision) of the Supervision Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic philosophy of supervision) of the Supervision Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on items 1 & 3 included in question 33 (relational/systemic supervision) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on items 1 & 3 included in question 33 (relational/systemic supervision) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on the questions 21, 24, and 26 (supervision) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the questions 21, 24, and 26 (supervision) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the supervision item (4) included in question 31 (relational/systemic supervision) of the Alumni Survey.
  - TARGET: 90% of students will record scores of 4 or greater on the supervision item (4) included in question 31 (relational/systemic supervision) of the Alumni Survey.

***Student Learning Outcome:*** Students will demonstrate the ability to provide instruction at the collegiate level.

***Benchmarks***

- 90% of students will complete the Teaching Proficiency components as part of a passing Doctoral Portfolio within 3 years of entering the program.
  - TARGET: 100% of students will complete the Teaching Proficiency components as part of a passing Doctoral Portfolio within 4 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items 1 - 3 included in question 37 (teaching) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items 1 – 3 included in question 37 (teaching) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on questions 22 and 23 (teaching) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on questions 22 and 23 (teaching) of the Program Exit Evaluation.
- 80% of students will report scores of 4 or greater on the teaching items (1 – 3) included in question 31 (relational/systemic teaching) of the Alumni Survey.
  - TARGET: 90% of students will report scores of 4 or greater on the teaching items (1 – 3) included in question 31 (relational/systemic teaching) of the Alumni Survey.

**PROGRAM GOAL:** Students will understand the intersection of contextual factors (Ethnicity, Gender, Sexual Orientation, Socio-Economic Status, etc.) and the research, clinical, supervision, and teaching philosophies and behaviors central to CMFT profession.

### **PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:**

AAMFT Code of Ethics – with special attention to:

*Standard I - Marriage and family therapists advance the welfare of families and individuals and make reasonable efforts to find the appropriate balance between conflicting goals within the family system.*

*1.1 Non-Discrimination:* Marriage and family therapists provide professional assistance to persons without discrimination on the basis of race, age, ethnicity, socioeconomic status, disability, gender, health status, religion, national origin, sexual orientation, gender identity or relationship status

MFT Educational Guidelines – Area XI – to be applied at a level appropriate for doctoral programs.

*10.01 Programs are expected to infuse their curriculum with content that addresses issues related to diversity, power and privilege as they relate to age, culture, environment, ethnicity, gender, health/ability, nationality, race, religion, sexual orientation, spirituality, and socioeconomic status.*

### Core Competencies

*6.1.3 Conceptual - Understand the legal, ethical, and contextual issues involved in the conduct of clinical research and program evaluation.*

*1.2.1 Perceptual - Recognize contextual and systemic dynamics (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, spirituality, religion, larger systems, social context).*

*4.3.2 Executive - Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, disability, personal history, larger systems issues of the client).*

**Student Learning Outcome:** Students will demonstrate understanding of the intersection of contextual factors (Ethnicity, Gender, Sexual Orientation, Socio-Economic Status, etc.) and the research, clinical, supervision, and teaching philosophies and behaviors central to CMFT.

### **Benchmarks**

- 80% of students will record average scores of 4 or greater for item 11 (Research Competency), on the PhD Program Exit Evaluation survey.
  - TARGET: 90% of students will record average scores of 4 or greater for item 11 (Research Competency), on the PhD Program Exit Evaluation survey.
- 80% of students will receive scores of 4 (developmentally appropriate) or greater for the items included in questions 28.8 of the Internship/Stakeholder Survey (Research Competency).
  - TARGET: 90% of students will receive scores of 4 (developmentally appropriate) or greater for the items included in question 28.8 of the Internship/Stakeholder Survey (Research Competency).
- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Evaluation.

- 80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on question 20 (clinical competency) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on questions 20 (clinical competency) of the Program Exit Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Supervision Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Supervision Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Supervision Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Supervision Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on item 2 included in question 33 (relational/systemic supervision) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on items 2 included in question 33 (relational/systemic supervision) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on the question 25 (supervision) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the question 25 (supervision) of the Program Exit Evaluation.

- 80% of students will receive scores of 4 or greater on items 4 and 5 included in question 37 (teaching) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on items 4 and 5 included in question 37 (teaching) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on question 25 (teaching) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on question 25 (teaching) of the Program Exit Evaluation.

---

## Master's Program Goals, Outcomes, and Benchmarks

---

**PROGRAM GOAL:** Students will be qualified to provide Couple, Marriage, and Family Therapy from a relational/systemic perspective and to apply appropriate relational/systemic ethics to practice.

### PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:

AAMFT Code of Ethics – with specific attention to:

(S1) Standard I - *Marriage and family therapists advance the welfare of families and individuals and make reasonable efforts to find the appropriate balance between conflicting goals within the family system.*

(S2) Standard II - *Marriage and family therapists have unique confidentiality concerns because the client in a therapeutic relationship may be more than one person. Therapists respect and guard the confidences of each individual client.*

(S3) Standard III - *Marriage and family therapists maintain high standards of professional competence and integrity.*

### MFT Educational Guidelines

101.01 *Area I content will address the historical development, theoretical and empirical foundations, and contemporary conceptual directions of the field of marriage and family therapy.*

101.02 *Area I content will enable students to conceptualize and distinguish the critical epistemological issues in the profession of marriage and family therapy.*

101.03 *Area I material will provide a comprehensive survey and substantive understanding of the major models of marriage, couple, and family therapy.*

102.01 *Area II content will address, from a relational/systemic perspective, psychopharmacology, physical health and illness, traditional psychodiagnostic categories, and the assessment, diagnosis and treatment of major mental health issues.*

102.03 *Area II material will address a wide variety of presenting clinical problems.*

103.01 *Area III will include content on individual and family development across the lifespan.*

104.01 Area IV content will include professional identity, including professional socialization, scope of practice, professional organizations, licensure, and certification.

104.02 Area IV content will focus on ethical issues related to the profession of marriage and family therapy and the practice of individual, couple, and family therapy. A generic course in ethics does not meet this standard.

104.03 Area IV will address the AAMFT Code of Ethics, confidentiality issues, the legal responsibilities and liabilities of clinical practice and research, family law, record keeping, reimbursement, the business aspects of practice, and familiarity with regional and federal laws as they relate to the practice of individual, couple and family therapy.

201.01 Direct client contact is defined as face – to - face (therapist and client) therapy with individuals, couples, families, and/or groups from a relational perspective. Assessments may be counted as direct client contact if they are face – to - face processes that are more than clerical in nature and focus. Psychoeducation may be counted as direct client contact.

201.02 Traditionally, programs have required students to complete 500 supervised, direct client contact hours. The program may choose to uphold the 500 client contact hour standard.

**Student Learning Outcome:** Students will demonstrate the ability to provide Couple, Marriage, and Family Therapy from a relational/systemic perspective.

### **Benchmarks**

- 90% of students will complete the Clinical Proficiency components as part of a passing Master’s Degree Portfolio within 2 years of entering the program.
  - TARGET: 100% of students will complete the Clinical Proficiency components as part of a passing Doctoral Portfolio within 3 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Practicum Self Evaluation.

- 80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the Internship Evaluation.
- 80% of students will record scores of 4 or greater on the questions 3 and 6 - 7 (clinical) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the questions 3 and 6 - 7 (clinical) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the clinical items in questions 19 (2 – 3 & 6) and 20 (1) of the Alumni Survey.
  - TARGET: 90% of students will record scores of 4 or greater on the clinical items in questions 19 (2 – 3 & 6) and 20 (1) of the Alumni Survey.

***Student Learning Outcome:*** Students will demonstrate the ability to apply appropriate relational/systemic ethics to practice.

### ***Benchmarks***

- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the Internship Evaluation.

- 80% of students will record scores of 4 or greater on question 5 (ethics) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on question 5 (ethics) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the ethics items in question 19 (4 & 5) of the Alumni Survey.
  - TARGET: 90% of students will record scores of 4 or greater on the ethics items in question 19 (4 & 5) of the Alumni Survey.

**PROGRAM GOAL:** Students will be prepared to operate from a science informed perspective.

**PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:**

AAMFT Code of Ethics – with specific attention to:

*(S5) Standard V - Marriage and family therapists respect the dignity and protect the welfare of research participants, and are aware of applicable laws, regulations, and professional standards governing the conduct of research.*

MFT Educational Guidelines

*105.01 Area V content will include significant material on research in couple and family therapy.*

*105.02 Area V content will focus on research methodology, data analysis and the evaluation of research.*

*105.03 Area V content will include quantitative and qualitative research and its methods.*

Core Competencies

*6.3.2 Executive - Use current MFT and other research to inform clinical practice.*

**Student Learning Outcome:** Students will demonstrate the ability to operate from a science informed perspective.

**Benchmarks**

- 90% of students will complete the Research and Scholarship Proficiency components as part of a passing Master’s Degree Portfolio within 3 years of entering the program.

- TARGET: 100% of students will complete the Research and Scholarship Proficiency components as part of a passing Master's Degree Portfolio within 4 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the Practicum Self Evaluation.
- 80% of students will record scores of 4 or greater on questions 8 - 11 (research) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on questions 8 - 11 (research) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the research/empirical validation items in questions 19 (1, 6) and 20 (1) of the Alumni Survey.
  - TARGET: 90% of students will record scores of 4 or greater on the clinical items in question 19 (2 – 6) of the Alumni Survey.

**PROGRAM GOAL:** Students will integrate addiction and recovery science in their clinical practice.

**PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:**

AAMFT Code of Ethics – with specific attention to:

*(S1) Standard I - Marriage and family therapists advance the welfare of families and individuals and make reasonable efforts to find the appropriate balance between conflicting goals within the family system.*

*(S2) Standard II - Marriage and family therapists have unique confidentiality concerns because the client in a therapeutic relationship may be more than one person. Therapists respect and guard the confidences of each individual client.*

(S3) Standard III - *Marriage and family therapists maintain high standards of professional competence and integrity.*

### MFT Educational Guidelines

106.01 Additional learning will augment students' specialized interest and background in individual, couple, and family therapy. Additional courses may be chosen from coursework offered in a variety of disciplines.

### Core Competencies

*1.2.3 Perceptual - Recognize issues that might suggest referral for specialized evaluation, assessment, or care.*

*2.1.3 Conceptual - Understand the clinical needs and implications of persons with comorbid disorders (e.g., substance abuse and mental health; heart disease and depression).*

*2.1.5 Conceptual - Understand the current models for assessment and diagnosis of mental health disorders, substance use disorders, and relational functioning.*

***Student Learning Outcome:*** Students will demonstrate their understanding of the application of addiction and recovery science to relational/systemic clinical intervention.

### ***Benchmarks***

- 90% of students will complete the Addiction and Recovery Proficiency components as part of a passing Master's Degree Portfolio within 2 years of entering the program.
  - TARGET: 100% of students will complete the Research and Scholarship Proficiency components as part of a passing Master's Degree Portfolio within 3 years of entering the program.
- 80% of students will receive scores of 4 or greater on the items included in question 11 (addictions) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 11 (addictions) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 11 (addictions) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 11 (addictions) of the Practicum Self Evaluation.

- 80% of students will record scores of 4 or greater on questions 12 - 14 (addictions) of the Program Exit Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on questions 12 - 14 (addictions) of the Program Exit Evaluation.
- 80% of students will record scores of 4 or greater on the addiction and recovery item in questions 20 (2) of the Alumni Survey.
  - TARGET: 90% of students will record scores of 4 or greater on the addiction and recovery item in questions 20 (2) of the Alumni Survey.

**PROGRAM GOAL:** Students will understand the intersection of contextual factors (Ethnicity, Gender, Sexual Orientation, Socio-Economic Status, etc.) and the application of research and clinical intervention central to CMFT.

### **PROFESSIONAL MARRIAGE AND FAMILY THERAPY PRINCIPLES:**

#### AAMFT Code of Ethics:

*Standard I - Marriage and family therapists advance the welfare of families and individuals and make reasonable efforts to find the appropriate balance between conflicting goals within the family system.*

*1.1 Non-Discrimination: Marriage and family therapists provide professional assistance to persons without discrimination on the basis of race, age, ethnicity, socioeconomic status, disability, gender, health status, religion, national origin, sexual orientation, gender identity or relationship status*

#### MFT Educational Guidelines – Area II

*102.02 Area II content will address contemporary issues, which include but are not limited to gender, sexual functioning, sexual orientation, sex therapy, violence, addictions, and abuse, in the treatment of individuals, couples, and families from a relational/systemic perspective.*

*201.07 Students will work with a wide variety of people, relationships, and problems. Specifically, the program will demonstrate that students have the opportunity to work with clients who are diverse in terms of age, culture, physical ability, ethnicity, family composition, gender, race, religion, sexual orientation and socioeconomic status.*

#### Core Competencies

*1.2.1 Perceptual - Recognize contextual and systemic dynamics (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, spirituality, religion, larger systems, social context).*

*4.3.2 Executive - Deliver interventions in a way that is sensitive to special needs of clients (e.g., gender, age, socioeconomic status, culture/race/ethnicity, sexual orientation, disability, personal history, larger systems issues of the client).*

**Student Learning Outcome:** Students will demonstrate understanding of the intersection of contextual factors (Ethnicity, Gender, Sexual Orientation, Socio-Economic Status, etc.) and the application of research and clinical intervention central to CMFT.

### **Benchmarks**

- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Evaluation.
- 80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Self Evaluation.
  - TARGET: 90% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the Practicum Self Evaluation.
- 80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Internship Evaluation.
  - TARGET: 90% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the Internship Evaluation.

---

## Faculty Outcomes

---

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

1. **Be active in producing and sharing high quality research.** They will:
  - a. Publish in professional journals and present research at national conferences.
    - i. Faculty vita
  - b. Participate in funded research, including grants and contracts, and submit proposals for these projects.
    - i. Faculty vita
  - c. Mentor students in research projects including class papers, qualifying exams, small groups, 7000 article, and the dissertation.
    - i. Co-authored publications on vita
    - ii. Student feedback for class papers
    - iii. Ongoing research meetings with students (e.g., small group, individual meetings)
2. **Be active contributors to the development of the profession of MFT. This occurs through clinical practice, supervision of interns, and service in their professional spheres.** Faculty will:
  - a. Be involved in clinical activity.
    - i. Private practice, co-therapy with students, etc.
  - b. Provide clinical supervision of students and interns.
    - i. Evaluations for practicum (MFT 6395)
  - c. Serve in departmental, university, and national roles.
    - i. Faculty vita
3. **Teach high quality graduate and undergraduate courses and socialize doctoral students in teaching and instruction.** Faculty will:
  - a. Teach doctoral curriculum and provide examples and mentoring for instructors.
    - i. Course instruction and student feedback
    - ii. Accomplished student learning outcomes

**TTU MFT Faculty**

*[For full vitae, see the MFT website]*

**Cameron Brown, Assistant Professor**

Ph.D. Kansas State University, 2017

*Couple sexuality, Chronic Disease*

**Nicole Springer, Associate Professor of Practice, Director, Family Therapy Clinic**

Ph.D. Texas Tech University, 1999

*Grief and loss, Poor Pre-natal Diagnosis and Relational Coping Process, Resilience in Families Living with Down Syndrome*

**Douglas Smith, Associate Professor, Program Director**

Ph.D. Kansas State University, 2006

*Systemic intervention for Intimate Partner Violence and systemic implications of traumatic stress*

**Sara Smock Jordan, Associate Professor**

Ph.D. Virginia Tech, 2006

*Process and outcome research on the effectiveness and training of solution-focused brief therapy.*

**Kristy Soloski, Assistant Professor**

Ph.D. Kansas State University

*Research focuses on family processes related to substance use trajectories and culturally sensitive clinical and research practices.*

**Stephen Fife, Professor**

Ph.D. Brigham Young University, 2004

*Couple therapy, Treatment and healing of infidelity, therapeutic change process, Foundations of effective clinical practice.*

**Jaclyn Cravens, Assistant Professor**

Ph.D. Texas TEch University, 2013

*Influence of technology on couples and families.*

**SECTION II**  
**GENERAL INFORMATION**

## MAJOR STEPS IN MFT PROGRAM

### I. Academic Course Work

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

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

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

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

**Once students enroll in dissertation hours (MFT 8000), students must continue to enroll for dissertation hours each semester until graduation (every long semester and at least one summer session each year).**

## **II. Plan of Study Meeting**

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

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

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

## **III. Practicum**

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

## **IV. Completion of Clinic Responsibilities**

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

## **V. Annual Evaluations**

Students will be evaluated on a regular basis in coursework, practicum, and the fulfillment of their assistantship and other responsibilities. Formal evaluations will take place at the time of their Plan-of-Study/Examination meetings in the Spring of their first year.

Opportunities for informal feedback from faculty and staff will be abundant, however, an appointment with the faculty can be scheduled during the Fall semester each year for any continuing students (meeting dates and times will be announced).

## **VI. Portfolio**

All students will complete the master's degree portfolio (MS) or the doctoral portfolio (PhD).

The portfolio allows students to aggregate work demonstrating their mastery of elements of the program goals. The elements of the portfolio are designed not only to measure student outcomes, but to provide students the opportunity to engage in experiences with practical value for their professional development and career.

- **Master's** portfolios are typically submitted after the completion of the majority of coursework, between the end of the second Spring semester and the end of the second Summer session in year two of study. The student's advisor or committee chair will provide initial approval of the portfolio before it is submitted to the entire MFT faculty for review.
- **Doctoral** portfolios are typically submitted after the completion of the majority of course work, between the end of the second Spring semester and the beginning of the third Fall semester. The student's doctoral advisor or committee chair will provide initial approval of the portfolio before it is submitted to the entire MFT faculty for review.

## **VII. Externship (MS) or Internship (PhD)**

All students will complete an externship or internship as part of the graduate program (see Section X on Externship/Internship.)

## **VIII. Thesis (optional MS) or Dissertation (PhD)**

Students in the doctoral program **will** complete a dissertation. Students in the master's degree program **may** choose to complete a master's thesis as part of the thesis track.

**SECTION III**  
**PROGRAM OBJECTIVES**

**Texas Tech University**  
**Couple, Marriage, and Family Therapy Program**

**Program Objectives**

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

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

**Master's Degree.** Students completing the master's program in MFT will meet the educational requirements for Associate Marriage and Family Therapist licensure in Texas. Students graduating with a M. S. in MFT are required to complete 500 hours of face-to-face therapy (at least 200 hours with couples or families). The total hours are comprised of hours accumulated in clinical work at the TTU Family Therapy Clinic, approved community placements outside the Family Therapy Clinic, alternative hours and internship hours. (See Practicum and External Placement sections for further explanation of hours.)

**Doctoral Degree.** Students graduating with a Ph.D. in MFT are required to provide a minimum of 250 clinical therapy hours during the doctoral program (\*at least 100 hours must be with relational systems) through the TTU Family Therapy Clinic. The 250 hours may include a maximum of 50 alternative hours. In addition, all graduates of COAMFTE accredited doctoral programs must have completed the Foundational Practice Component. The Foundational Practice Component includes a minimum of 500 clinical contact hours with individuals, couples, families, and other systems physically present, at least 40% of which must be with relational systems. The 500 hours must occur over a minimum of 12 months of clinical activity, may include a maximum of 100 alternative hours, and include at least 100 hours of clinical supervision from AAMFT Approved Supervisors. Graduates of COAMFTE accredited master's degree programs will have met the Foundational Practice Component as part of the requirements of their degree. Doctoral students from unaccredited programs or non-clinical programs will be required to complete the Foundational Practice Component as part of doctoral studies.

In Texas, full licensure as an MFT requires 1500 hours of face-to-face therapy and an additional 1500 hours of therapy-related activities **BEGINNING ONLY AFTER** the granting of the Associate License. While other states' requirements differ, AAMFT requires full state licensure for Clinical Membership. In addition to meeting program requirements, it is the student's best interest to

take the examination for Associate MFT as soon as possible so that the student can begin accumulating hours toward state licensure. The TTU MFT program is not designed to meet the requirements for licensure in other professions (e.g., licensed professional counselor [LPC]).

Upon completion of the graduate degree in Couple, Marriage, and Family therapy, we expect the student to have achieved competence as defined by the Program Goals and Student Learning Outcomes.

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

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

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

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

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

requirements for licensure in other professions (e.g., licensed professional counselor [LPC]).

**SECTION IV**  
**POLICIES**

## **COAMFTE Standards Version 12**

The Texas Tech University Couple, Marriage, and Family Therapy Program adheres to the COAMFTE Accreditation Standards, Version 12 set forth by the Commission on Accreditation for Marriage and Family Therapy Education. All accredited programs are expected to meet or exceed the standards through their particular period of accreditation. These accreditation standards can be viewed online at [COAMFTE](#) by all registered AAMFT members or through obtaining a copy in the Program Director's office.

## **Diversity Statement**

### **Texas Tech University Graduate Programs in Couple, Marriage, and Family Therapy**

The Texas Tech Couple, Marriage, and Family Therapy program adopts a posture of respect with regard to understanding and accepting the variability among social, religious, cultural, and other groups with regard to the worth and uniqueness of each individual. We endorse and uphold the anti-discrimination and affirmative stance of our University and embrace the plurality of the human experience as an invaluable resource to the quality and vitality of our program and profession. We are committed to the principle that in no aspect shall there be differences in the treatment of persons or discrimination with regard to the recruitment, admission, codes of conduct, hiring, retention, or dismissal of students, faculty, and supervisors or other relevant educators and/or staff on the basis of race, age, gender, ethnicity, sexual orientation, relationship status, gender identity, socioeconomic status, disability, health status, religion and spiritual beliefs and/or affiliation, and/or national origin.

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

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

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

Our benchmarks for achieving diversity include the following:

1. We assess the composition of the faculty, supervisors, student body, and clinical populations in terms of diversity definition of the program. This is done with our annual report to COAMFTE as well as faculty reviews during meetings and yearly retreats.
2. During recruitment we do several things in regard to our goals for diversity:

- a. We invite applicants to speak to “unique contributions to diversity” in their application statements (e.g., first to go to college, unique background, etc.).
  - b. We calculate the number of applications of diverse status, as well as the numbers accepted and enrolled in the program.
  - c. When appropriate, we use department and graduate school funds to help bring in diverse students out for interviews where financial concerns exist.
  - d. We ask questions of our interviewees regarding their appreciation and comfort with diverse individuals in potential clinical settings.
  - e. We attempt to connect with diverse faculty and potential students at national conferences.
3. In general we try to help diverse students identify appropriate financial or scholarly support (e.g., scholarships, research opportunities). Specific scholarships are targeted for improving diverse representation among our cohorts, and we seek to keep students aware of opportunities such as the minority student awards from AAMFT. We have so far been successful in securing the AAMFT/SAMHSA Minority Fellowships, as well as other awards.
4. We discuss in practicum and other classes issues of diversity, which generates an openness regarding this topic that can lead to further in- and out-of-class discussions.
5. We have a doctoral class on diversity (MFT 6370) that focuses on cross-cultural research and diversity in clinical populations.
6. We have encouraged members of the MFT faculty to act as official Texas Tech University mentors for students of color at the undergraduate level.
7. All faculty are required to complete Employee Non-Discrimination training every two years at TTU.
8. In general we try to foster a spirit of respect and tolerance for others and take corrective action when we feel like an individual’s rights or dignity are not being protected. This has happened with individual meetings with the Program Director as well as meetings between faculty and students. When significant problems arise, policies are in place for the filing of complaints or grievances.

**Texas Tech University**  
**Couple, Marriage, and Family Therapy Program**

**Statement of Human Dignity**

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

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

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

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

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

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

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

**Texas Tech University**  
**Couple, Marriage, and Family Therapy Program**

**Grievance and Dismissal Policies and Procedures**  
**for Graduate Students**

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

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

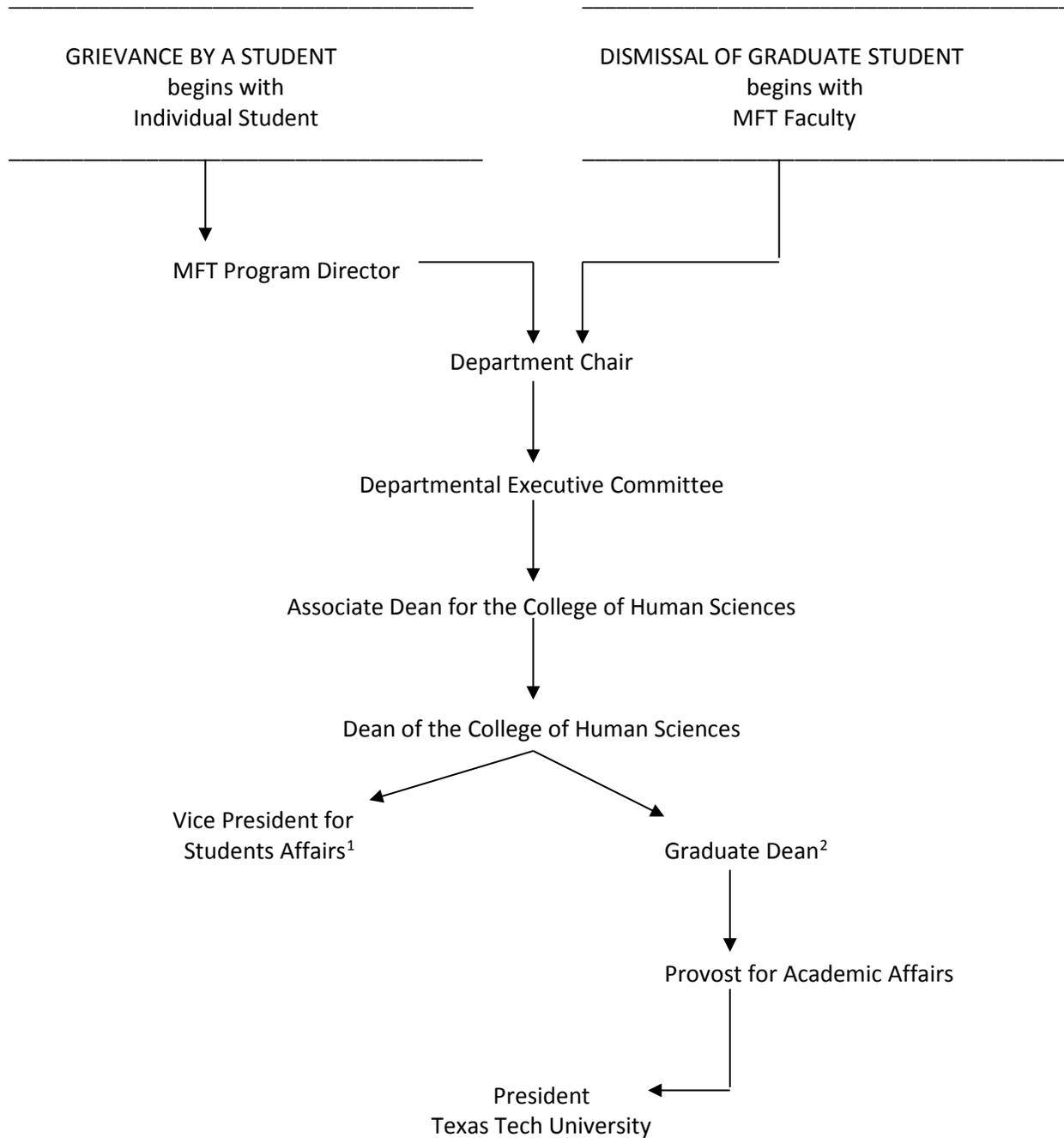
If satisfactory resolution of the grievance is not achieved with the Departmental Executive Committee the individual would next bring the issue to the Associate Dean of Academics, and, if necessary, then to the Dean of the College. The next level of appeal is the Dean of the Graduate School (see Figure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

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

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

FIGURE 1

APPEALS PROCESS



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

<sup>2</sup> Grievance involves performance in the clinical role, publications and co-authorship, grade appeals, appeals for exceptions to program requirements, assignment to and performance in the assistantship role, suspensions, probation, and dismissal.

## SPECIFIC AREAS OF CONCERN

### Performance in the Clinical Role

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

### Publications

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

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

### Access to Personal Records

Guidelines governing student access to personal records and the procedures for

challenging information in these records are contained in the University records policy which is printed in the Directory of Classes each semester. The records policy may also be viewed at <http://www.depts.ttu.edu/opmanual/OP01.04.pdf>.

### Sex Discrimination

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

### Sexual Harassment

Student concerns about sexual harassment which involve faculty or staff should be directed to <http://www.depts.ttu.edu/studentresolutioncenter/> or 742-SAFE..

Harassment incidents among students should be reported to <http://www.depts.ttu.edu/studentresolutioncenter/> or 742-SAFE..

### Students with Disabilities

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

### Grade Appeals

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

### Appeals for Exceptions to Program Requirements

If the requirement at issue is a MFT Program requirement, the student should present a

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

#### Assignment to and Performance in Assistantship Role

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

#### Suspension, Probation, and Dismissal

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

Because it is a clinical program, it may be necessary to dismiss a student from the MFT Program for other than academic reasons. One of the most difficult tasks facing a faculty occurs when a student's behavior is deemed to be so inappropriate as to warrant major concern as to whether the person is emotionally, interpersonally, or ethically suited for entry into the profession of marriage and family therapy. With regard to ethical matters, students are required to be familiar with and abide by the AAMFT Code of Ethical Principles for Marriage and Family Therapists, as well as the Texas Tech Code of Student Conduct. Web addresses containing these codes are: <http://www.aamft.org/resources/LRMPlan/Ethics/ethicscode2001.asp> and <http://www.depts.ttu.edu/studentaffairs/CampusCrime/documents/Code%20of%20Student%20Conduct%202005-2006.pdf>

The professional role is a decidedly sensitive one. Responsibility must be assumed by the MFT faculty to assure that those who might pose serious risks to clients and the standards of the profession (due to emotional instability or questionable ethical standards) are not allowed to enter the profession. Although such measures are most unpleasant, such decisions occasionally are necessary in considering the welfare of everyone involved. Such issues may transcend effective adjustments via feedback provided in day-to-day supervision and instruction. Accordingly, when such problems occur, the MFT faculty convenes to specify its concern in writing to the student and the student's advisor. Where possible, this statement specifies the particular behaviors in question, the desired changes and means of addressing them, and a time for re-evaluation of the concern where appropriate. If remedial action on the part of the student is not deemed feasible, the student should be informed about the reasons why he/she is regarded as unsuitable for this particular MFT training program.

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

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

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

### Academic Conduct

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

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

coursework or other projects.

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

**Texas Tech University**  
**Graduate Programs in Couple, Marriage, and Family Therapy**

**Retention and Completion of Your Degree**

Couple, Marriage, and Family Therapists, in their roles as clinicians, supervisors, researchers, and academics have a great deal of influence in the lives of clients, supervisees, and students. As a student in the program, you are expected to be mindful of your influence, hold yourself to a high standards of conduct, and maintain a high level of performance in areas including, but not limited to, academics, ethics, clinical performance, professionalism, and collegiality.

**Academics**

Students are expected to be invested in their academic coursework and to be active participants in the learning process. The TTU CMFT Program requires that all graduate students earn a final letter grade of A or B in all **required** master's and doctoral coursework in order to satisfy the MFT program graduate degree plan requirements. Final course grades of C or lower will not be accepted or applied to your degree plan. Any course in which a final grade of C or lower is earned must be repeated until a grade of A or B is achieved. An alternative course may be substituted if the required course will not be offered within a reasonable timeframe. Any substitutions must be pre-approved by the MFT Program Director; certain specialized courses may not have any acceptable substitutions. In such instances, the student must wait until the required course is offered again within the program or department. Students that demonstrate a pattern of difficulty meeting the grade standard will meet with the program director and program faculty to develop a remediation plan. If the implementation of the remediation plan is insufficient to correct the problem, the student may be placed on academic probation or dismissed from the program.

**Ethics**

Students are expected to conduct themselves in their clinical work and in their general conduct according to ethical and legal guidelines as outlined in Texas law and the AAMFT code of ethics. Due to the sensitivity of the professional role of a marriage and family therapist, supervisor, researcher or instructor, ethical conduct is taken very seriously. As determined by the faculty, students found to have engaged in or to be engaging in ethical misconduct in their clinical work or in other areas such as cheating in coursework, misrepresenting facts in clinical paperwork or in communication with faculty, or engaging in other ethically questionable conduct may be subject to corrective measures. Examples of corrective measures include, but are not limited to, implementation of a remediation plan, receiving a failing grade, removal from cases and all activity in the clinic, removal from external placements, and dismissal from the program.

**Clinical Performance**

As a program, we endeavor to train high quality relational systemic clinicians. Sometimes, even academically capable students will face challenges with the clinical application of knowledge. Students are expected to be able to appropriately apply theoretical material in the clinic

setting. This relates to being able to engage clients in therapy, assess existing problems, and design and implement intervention strategies. Students are expected to be familiar with a variety of family therapy theories. A deficiency may exist when a student appears to not be able to apply general tenets of systems theory, apply specific tenets of family therapy theory, or struggles to join effectively with clients as guided by the practicum supervisor. When an area of concern is identified with regard to a student's clinical performance, specific goals and strategies will be implemented in supervision to help the student develop the necessary skills. This is a normal part of the supervision experience. However, if the faculty or site supervisor believes that the problem fits within the category of a severe deficiency and it is not alleviated through initial goal setting, the faculty member will discuss the concern with the entire MFT faculty.

The faculty will make the determination of when a problem warrants the implementation of a remediation plan. If it is determined that a remediation plan is required, the student will meet with the program director and program faculty as appropriate. The student and faculty member(s) will strategize and contract for specific steps the student can take to resolve this deficiency and decide on a time schedule for accomplishing this. The remediation plan will be finalized in writing with a copy given to the student and a copy to remain in the student's file. If the student satisfactorily resolves the severe deficiency, he/she will receive a letter notifying him/her of such with a copy placed in his/her file and copies for all members of the MFT faculty.

If the student still does not follow the remediation plan or the problem is not resolved, the student may be dismissed from the program. S/he will meet with the MFT faculty to discuss the situation, and if dismissed from the program will receive a letter from the Program Coordinator notifying him/her of dismissal. Copies of the letter will also be placed in the student's file. Counseling a student out of the program is a difficult situation for both faculty and students. Where possible, faculty will work with those students who exhibit severe deficiencies in an effort to assist them in correcting the problems. Where remedial action on the part of the student is not deemed feasible such as in cases, including, but not limited to, ethical misconduct or emotional instability, the student may be dismissed from the program. In such cases the student will be given specific feedback about the reasons for his/her dismissal. The members of the MFT faculty remain committed to students' growth and are invested in the success of all students in the program. As such we will make every effort to help students address any deficiencies in a way that will allow students to benefit fully from the training and to reach their potential as therapists.

### **Professionalism**

Students are expected to consistently interact in their work with faculty, site supervisors, and other students in appropriate ways. Students are expected to behave in professional fashion, taking care to discuss cases in confidential and sensitive ways, approaching colleagues with respect, and responding appropriately to feedback given by faculty and site supervisors. When a student disagrees with the feedback of a faculty or site supervisor, the student is expected to discuss this with that person and not passively dismiss it or discuss it as a problem with other students and faculty. Similarly, students

are expected to be sensitive when giving feedback to colleagues, recognizing when their advice may be ill timed or inappropriate to the situation.

We encourage the free expression and discussion of ideas in an environment that is supportive of diversity of experience and perspectives. While we would never want to encourage an environment where any point of view is suppressed, we expect students and faculty to be able to engage in discussion, debate, or disagreement while maintaining respect for all involved.

Students who are disruptive to the mission and goals of the program due to unprofessional behavior will be asked to meet with the program director and program faculty as appropriate. **The student and faculty member(s) will strategize and contract for specific steps the student can take to resolve this deficiency and decide on a time schedule for accomplishing this.** The remediation plan will be finalized in writing with a copy given to the student and a copy to remain in the student's file. If the student satisfactorily resolves the problem, he/she will receive a letter notifying him/her of such with a copy placed in his/her file and copies for all members of the MFT faculty.

If the student still does not follow the remediation plan or the problem is not resolved, the student may be dismissed from the program. S/he will meet with the MFT faculty to discuss the situation, and if dismissed from the program will receive a letter from the Program Coordinator notifying him/her of dismissal. Copies of the letter will also be placed in the student's file. Counseling a student out of the program is a difficult situation for both faculty and students. Where possible, faculty will work with those students who exhibit severe deficiencies in an effort to assist them in correcting the problems. Where remedial action on the part of the student is not deemed feasible such as in cases, including, but not limited to, ethical misconduct or emotional instability, the student may be dismissed from the program. In such cases the student will be given specific feedback about the reasons for his/her dismissal. The members of the MFT faculty remain committed to students' growth and are invested in the success of all students in the program. As such we will make every effort to help students address any deficiencies in a way that will allow students to benefit fully from the training and to reach their potential as therapists, supervisors, researchers, and instructors.

### **What should I do if I am struggling?**

In our experience, one of the most frequent mistakes made by graduate students is to assume they have to do it all, on their own. The CMFT program faculty are fully invested in your success and want to see you achieve your goals. We will work with you and make any reasonable accommodations we can to ensure your success. Don't wait until it is too late. If you find yourself struggling academically, clinically, professionally, or personally:

- 1) Talk with your advisor to identify steps you may take to address the concerns.
- 2) Talk with the CMFT Program Director to make changes to your plan of study where possible. There is no rule that says you have to finish the program in 3 years, or that you have to take six stats classes in a semester.

- 3) Talk to a therapist. It is surprising how many therapists are resistant to engaging in therapy for themselves. If you need help identifying a therapist, we can provide referrals.
- 4) **DON'T WAIT UNTIL ANY PROBLEM HAS COMPROMISED YOUR ACADEMIC< CLINICAL< OR PROFESSIONAL PERFORMANCE!**

Texas Tech MFT Program  
Advising Policy

Each student is assigned a temporary MFT (or ADRS) faculty advisor upon entering the program. This advisor is an intermediary until the permanent advisor, who in most cases will serve as the portfolio advisor and thesis/dissertation committee chair, is chosen. The faculty advisor has several responsibilities and roles for the student throughout the program, and is a primary point of contact for any questions or concerns. The faculty advisor is responsible for official program advising and research mentorship, including program policy, curriculum advising, licensure, internship/externship placement, portfolio, and thesis/dissertation advising. **Faculty advisors are expected to schedule advising meetings with their advisees, and shall arrange no less than two group advisee meetings a semester.** The advisor has the responsibility to communicate concerns about, or from, the student to the faculty, and will relay feedback from the faculty to the student. The advisor will evaluate progress of the student annually to determine the progress of the student in fulfilling the requirements for their degree in the pursuit of their post-graduate goals. Students considering pursuing licensure in other states are strongly encouraged to consult with their advisor and visit the licensure board for the state of interest. The student's advisor will provide guidance on the portfolio and will provide initial approval of the portfolio before it is submitted to the entire MFT faculty for review. In most cases, the advisor shall serve as a student's chair for her/his thesis or dissertation committee. In this role, the advisor will be the person to approve the proposal prior to submitting it to the members of the committee and to prepare the final document to be submitted to the committee for the defense. Approval to schedule the defense must be obtained 3 weeks prior to the defense, and should be coordinated with the advisor. Except under extraordinary circumstances, for the main article based upon the dissertation submitted for publication, the student is first author and the advisor is second author. Authorship follows APA guidelines.

**Student responsibility:**

It is important to note that each student also has responsibilities related to the advisee-advisor relationship. Developmentally, it is an appropriate time in graduate school to begin the process of becoming an independent and self-sufficient professional. The student's primary responsibility is to access her/his resources prior to contacting her/his advisor. This includes reading through and accessing the program manual as needed. The student also should take the role of a self-advocate, and reach out to her/his faculty advisor when s/he has questions/concerns or when s/he is struggling and may be in need of accommodations. It is the student's responsibility to decide on a permanent advisor. This choice can be made at any point in time, and can be changed at any point in time as needed. If the student is considering changing her/his faculty advisor, s/he is encouraged to talk with her/his advisor about any challenges or concerns prior to switching. The order of contact should be: contact current advisor to communicate desire to switch, contact potential new advisor to determine if they're able to take the student on, and finally notify in email all parties of the official switch including the Program Director and the Coordinator (i.e., Lori Minner).

**Texas Tech University**  
**Couple, Marriage, and Family Therapy Program**

**Confidentiality in Supervision and Training**

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

Section 4.7 of the AAMFT Code of Ethical Principles defines the limits of confidentiality for supervisees. The Texas Tech University Marriage and Family Therapy Program has a clear responsibility to protect clients under the care of student therapists from unethical or incompetent practices ([Code of Ethics](#)). We have an additional responsibility to Texas Tech University to protect the integrity and well-being of the Couple, Marriage, and Family Therapy Program as well as an obligation to the profession of Couple, Marriage, and Family Therapy to prevent unethical and/or incapacitated individuals from entering the profession.

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

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

With these two exceptions, information related to student's clinical performance will not be shared with other non-clinical faculty or administration. Should a student be required to enter personal therapy and/or cease doing therapy for remedial reasons, other faculty members outside of the MFT program, including administrators, will be informed only that the actions are

being taken for personal reasons. This will also be MFT policy should personal information concerning a student be related to the dismissal of a student from the program. If a student appeals any decision regarding standing in the program, then confidentiality cannot be maintained in the appeal process. It is imperative that supervisee confidentiality be maintained within these outlined parameters.

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

## Evaluation of Student Learning Outcomes

The MFT Program is committed to a recursive process of data collection and evaluation. The process is designed to evaluate student achievement on Student Learning Outcomes (SLOs) through data collection, which in turn informs program structure, content, and curriculum. The program faculty will meet at least once each regular semester to review the relevant data and to make adjustments to the program designed to best meet program goals. The Schedule of Data Collection & Evaluation provides an overview of the timetable.

### *Portfolio*

**MS.** The Master's Portfolio is designed to reflect the students' body of work and application of knowledge across three broad domains: Clinical, Research, and Addiction Sciences. Details of the Master's Portfolio are described in section 6 (Qualifying Examination) of the manual.

**PhD.** The Doctoral Portfolio is designed to reflect the students' body of work and application of knowledge across four broad domains: Research, Clinical, Supervision, and Teaching. Details of the Doctoral Portfolio are described in section 6 (Qualifying Examination) of the manual.

### *Thesis or Dissertation*

**MS.** The master's thesis is an optional component of the program students may choose to complete. We recommend the thesis option for students interested in pursuing a PhD. The thesis requires students to apply research and clinical/supervision knowledge to expand the body of MFT empirical research. The Master's Thesis is discussed in greater detail in section 12 (Thesis/Dissertation) of the manual.

**PhD.** The Doctoral Dissertation is the capstone achievement of the doctoral program. The dissertation requires students to apply research and clinical/supervision knowledge to expand the body of MFT empirical research. The Doctoral Dissertation is discussed in greater detail in section 12 (Thesis/Dissertation) of the manual.

### *Practicum Evaluations*

Each semester the student is enrolled in clinical practicum, the faculty instructor will complete a Practicum Evaluation. Practicum Evaluations are completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Practicum Evaluation provides student feedback and data related to program goals specific to the understanding and application of relational/systemic ethics, understanding and application of relational/systemic theory, understanding and application of knowledge related to contextual factors, and the use of empirical research to inform practice.

### *Practicum Self Evaluations*

Each semester the student is enrolled in clinical practicum, the student will complete a Practicum Self Evaluation. The Practicum Self Evaluation covers the same domains as the Practicum Evaluation completed by faculty.

### *Supervision Practicum Evaluations (PhD only)*

Each semester the student is enrolled in supervision practicum, the faculty instructor will complete a Supervision Practicum Evaluation. Supervision Practicum Evaluations are completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Supervision Practicum Evaluation provides student feedback and data related to program goals specific to the understanding and application of relational/systemic ethics, understanding and application of relational/systemic theory, understanding and application of knowledge related to contextual factors, and the use of empirical research to inform practice.

### *Supervision Practicum Self Evaluations (PhD only)*

Each semester the student is enrolled in clinical practicum, the student will complete a Supervision Practicum Self Evaluation. The Supervision Practicum Self Evaluation covers the same domains as the Practicum Evaluation completed by faculty.

### *Externship/Internship Stakeholder Survey*

At the conclusion of the student's externship or internship, the stakeholder with responsibility for direct supervision of the student will complete the Externship/Internship Stakeholder Survey. The survey is completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Externship/Internship Stakeholder Survey provides student feedback and data related to program goals specific to the understanding and application of relational/systemic ethics, understanding and application of relational/systemic theory, understanding and application of knowledge related to contextual factors, the ability to contribute to the body of MFT knowledge through original research, the ability to provide relational/systemic supervision, and the ability to provide instruction at the undergraduate/graduate level.

### *Program Exit Evaluation*

Each student will complete a Program Exit Evaluation at the end of their final semester of study. The survey is completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The Program Exit Evaluation is designed to allow students to provide feedback to the program about their educational experience. Specifically, students provide feedback regarding how the program prepared them to conduct high quality relational/systemic research, develop an advanced understanding of relational/systemic clinical intervention, provide relational/systemic supervision, and provide instruction at the collegiate level.

### *Alumni Survey*

The Alumni Survey will be sent to all program alumni during the spring semester of even numbered years. The survey is completed through the Qualtrics online survey service and data is aggregated every time the survey is completed. The survey is designed to provide alumni the opportunity to reflect and give feedback on their experience of how the program prepared them to meet the research, clinical, supervision, and/or teaching requirements of their chosen profession.

**SCHEDULE OF DATA COLLECTION & EVALUATION**

STUDENT LEARNING OUTCOMES/BENCHMARKS	DATA COLLECTION					EVALUATION	
	Fall	Spring	Sum I	Sum II	Other	Fall	Spring
<b>SLO #1 – Students will demonstrate the ability to conduct high quality relational/systemic research.</b>							
90% of students will complete the Research and Scholarship Proficiency components as part of a passing <b>Doctoral Portfolio</b> within 3 years of entering the program.					Student Entry to Candidacy	X	X
75% of students will successfully defend a <b>doctoral thesis</b> within four years of entering the program.					Dissertation Defense	X	X
80% of students will record average scores of 4 or greater for items 3 & 5 - 10, on the <b>PhD Program Exit Evaluation survey</b> .					Semester of Graduation	X	
80% of students will record average scores of 4 (well) or greater for the items included in questions 22 and 23 of the <b>Alumni Survey</b> .					Spring of Even Years		Even Years
80% of students will receive scores of 4 (developmentally appropriate) or greater for items 1 - 7 included in question 28 of the <b>Internship/Stakeholder Survey</b> .					End of Internship	X	
<b>SLO #2 – Students will demonstrate an advanced understanding of clinical intervention using a relational/systemic perspective.</b>							
90% of students will complete the Clinical Proficiency components as part of a passing <b>Doctoral Portfolio</b> within 3 years of entering the program.					Student Entry to Candidacy	X	X
80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the <b>Practicum Evaluation</b> .	1st year practicum	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X
80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the <b>Practicum Self Evaluation</b> .	1st year practicum	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X
80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the <b>Practicum Evaluation</b> .	1st year practicum	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X
80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the <b>Practicum Self Evaluation</b> .	1st year practicum	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X
80% of students will receive scores of 4 or greater on the items included in question 9 (empirical validation) of the <b>Practicum Evaluation</b> .	1st year practicum	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X
80% of students will record scores of 4 or greater on the items included in question 9 (empirical validation) of the <b>Practicum Self Evaluation</b> .	1st year practicum	1st year practicum	1st year practicum	1st year practicum	Additional Practicum as Needed	X	X
80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the <b>Internship/Stakeholder Survey</b> .					End of Internship	X	
80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic theory) of the <b>Internship/Stakeholder Survey</b> .					End of Internship	X	
80% of students will record scores of 4 or greater on the questions 12, 13, and 14 (clinical) of the <b>Program Exit Evaluation</b> .					Semester of Graduation	X	
80% of students will record scores of 4 (well) or greater for the items included in questions 26 and 27 of the <b>Alumni Survey</b> .					Spring of Even Years		Even Years
<b>SLO #3 – Students will demonstrate an understanding of relational/systemic clinical supervision.</b>							

<p>90% of students will complete the Supervision Proficiency components as part of a passing <b>Doctoral Portfolio</b> within 3 years of entering the program.</p> <p>80% of students will receive scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the <b>Supervision Practicum Evaluation</b>.</p> <p>80% of students will record scores of 4 or greater on the items included in question 3 (relational/systemic ethics) of the <b>Supervision Practicum Self Evaluation</b>.</p> <p>80% of students will receive scores of 4 or greater on the items included in question 5 (relational/systemic philosophy of supervision) of the <b>Supervision Practicum Evaluation</b>.</p> <p>80% of students will record scores of 4 or greater on the items included in question 5 (relational/systemic philosophy of supervision) of the <b>Supervision Practicum Self Evaluation</b>.</p> <p>80% of students will receive scores of 4 or greater on items 1 and 3 included in question 33 (relational/systemic supervision) of the <b>Internship/Stakeholder Survey</b>.</p> <p>80% of students will record scores of 4 or greater on the questions 21, 24, and 26 (supervision) of the <b>Program Exit Evaluation</b>.</p> <p>80% of students will record scores of 4 or greater on the supervision item (4) included in question 31 (relational/systemic supervision) of the <b>Alumni Survey</b>.</p>	<p>2nd yr. Supervision Practicum</p> <p>End of Internship</p> <p>Semester of Graduation</p> <p>Spring of Even Years</p>	<p>Student Entry to Candidacy</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>Even Years</p>
<p><b>SLO #4 – Students will demonstrate the ability to provide instruction at the collegiate level.</b></p>		
<p>90% of students will complete the Teaching Proficiency components as part of a passing <b>Doctoral Portfolio</b> within 3 years of entering the program.</p> <p>80% of students will receive scores of 4 or greater on items 1 - 3 included in question 37 (teaching) of the <b>Internship/Stakeholder Survey</b>.</p> <p>80% of students will record scores of 4 or greater on questions 22 and 23, (teaching) of the <b>Program Exit Evaluation</b>.</p> <p>80% of students will report scores of 4 or greater on the teaching items (1 – 3) included in question 31 (relational/systemic teaching) of the <b>Alumni Survey</b>.</p>	<p>Student Entry to Candidacy</p> <p>End of Internship</p> <p>Semester of Graduation</p> <p>Spring of Even Years</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>Even Years</p>
<p><b>SLO #5 – Students will demonstrate understanding of the intersection of contextual factors (Ethnicity, Gender, Sexual Orientation, Socio-Economic Status, etc.) and the research,</b></p>		
<p>80% of students will record average scores of 4 or greater for item 11 (Research Competency), on the <b>PhD Program Exit Evaluation survey</b>.</p> <p>80% of students will receive scores of 4 (developmentally appropriate) or greater on item 8 included in questions 28 of the <b>Internship/Stakeholder Survey</b> (Research Competency).</p> <p>80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the <b>Practicum Evaluation</b>.</p> <p>80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the <b>Practicum Self Evaluation</b>.</p> <p>80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the <b>Internship/Stakeholder Survey</b>.</p> <p>80% of students will record scores of 4 or greater on question 20 (clinical competency) of the <b>Program Exit Evaluation</b>.</p>	<p>Semester of Graduation</p> <p>End of Internship</p> <p>1st year practicum</p> <p>1st year practicum</p> <p>End of Internship</p> <p>Semester of Graduation</p>	<p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p> <p>X</p>

80% of students will receive scores of 4 or greater on the items included in question 7 (contextual factors) of the <b>Supervision Practicum Evaluation.</b>	2nd yr. Supervision Practicum		X	X			
80% of students will record scores of 4 or greater on the items included in question 7 (contextual factors) of the <b>Supervision Practicum Self Evaluation.</b>	2nd yr. Supervision Practicum		X	X			
80% of students will receive scores of 4 or greater on item 2 included in question 33 (relational/systemic supervision) of the <b>Internship Evaluation.</b>					End of Internship	X	
80% of students will record scores of 4 or greater on the question 25 (supervision) of the <b>Program Exit Evaluation.</b>					Semester of Graduation	X	
80% of students will receive scores of 4 or greater on items 4 and 5 included in question 37 (teaching) of the <b>Internship/ Stakeholder Survey.</b>					End of Internship	X	
80% of students will record scores of 4 or greater on question 25 (teaching) of the <b>Program Exit Evaluation.</b>					Semester of Graduation	X	
<b>Assessment of fiscal/physical resource sufficiency</b>							
The department and program will have sufficient fiscal resources to maintain a minimum of six full-time MFT faculty lines.						X	
The department and program will have sufficient fiscal resources to maintain support a minimum of five PhD students with two year assistantships every year.						X	
80% of students will score 4 or greater on the fiscal/physical resource items included on the End of Semester Practicum Self Evaluation, End of Semester Supervision Practicum Self Evaluation.	X	X	X	X		X	
80% of students will score 4 or greater on the fiscal/physical resource items included on the Program Exit Evaluation.					Semester of Graduation	X	
80% of faculty will score 4 or greater on the fiscal/physical resource items included on the End of Semester Practicum Evaluation, End of Semester Supervision Practicum Evaluation.	X	X	X	X		X	
80% of faculty will score 4 or greater on the fiscal/physical resource items included on the Program Director Evaluation.		X				X	
Annual Reviews with students		1st year PhD students					X
SAMFT Representatives attend MFT Faculty Meeting	X	X				X	X
Faculty Meeting Review and Discussion of Resources					Concurrent with review of student learning outcomes	X	
<b>Assessment of technological resource sufficiency</b>							
80% of students will score 4 or greater on the technological resource items included on the End of Semester Practicum Self Evaluation, End of Semester Supervision Practicum Self Evaluation.	X	X	X	X		X	
80% of students will score 4 or greater on the technological resource items included on the Program Exit Evaluation.					Semester of Graduation	X	
80% of faculty will score 4 or greater on the technological resource items included on the End of Semester Practicum Evaluation, End of Semester Supervision Practicum Evaluation.	X	X	X	X		X	

80% of faculty will score 4 or greater on the technological resource items included on the Program Director Evaluation.						X	
Annual Reviews with students					1st year PhD students		X
SAMFT Representatives attend MFT Faculty Meeting	X	X				X	X
Faculty Meeting Review and Discussion of Resources					Concurrent with review of student learning outcomes	X	
<b>Assessment of instructional and clinical resources</b>							
80% of students will score 4 or greater on the instructional/clinical resource items included on the End of Semester Practicum Self Evaluation, End of Semester Supervision Practicum Self Evaluation.	X	X	X	X		X	
80% of students will score 4 or greater on the instructional/clinical resource items included on the Program Exit Evaluation.					Semester of Graduation	X	
80% of faculty will score 4 or greater on the instructional/clinical resource items included on the End of Semester Practicum Evaluation, End of Semester Supervision Practicum Evaluation.	X	X	X	X		X	
80% of faculty will score 4 or greater on the instructional/clinical resource items included on the Program Director Evaluation.					X	X	
Annual Reviews with students					1st year PhD students		X
SAMFT Representatives attend MFT Faculty Meeting	X	X				X	X
Faculty Meeting Review and Discussion of Resources					Concurrent with review of student learning outcomes	X	
<b>Assessment of academic resources and student support services</b>							
80% of students will score 4 or greater on the academic resources and student support services items included on the End of Semester Practicum Self Evaluation, End of Semester Supervision Practicum Self Evaluation.	X	X	X	X		X	
80% of students will score 4 or greater on the academic resources and student support services items included on the Program Exit Evaluation.					Semester of Graduation	X	
80% of faculty will score 4 or greater on the academic resource items included on the End of Semester Practicum Evaluation, End of Semester Supervision Practicum Evaluation.	X	X	X	X		X	
80% of faculty will score 4 or greater on the academic resource items included on the Program Director Evaluation.					X	X	
Annual Reviews with students					1st year PhD students		X
SAMFT Representatives attend MFT Faculty Meeting	X	X				X	X
Faculty Meeting Review and Discussion of Resources					Concurrent with review of student learning outcomes	X	

<b>Review of Curriculum and Teaching/Learning Practices</b>			
Occurs at least once a semester (often more frequently) in conjunction with the review of aggregated data for SLOs during faculty meetings			X X
<b>Review of Program Climate</b>			
Annual Review with Students		1st year PhD students	X
SAMFT Representatives attend MFT Faculty Meeting	X	X	X X
Items on question 39 of the PhD Program Exit Evaluation			Semester of Graduation X
<b>Review of Program Director Effectiveness</b>			
Program Exit Evaluation, questions 34 - 36			Semester of Graduation X
Program Director Evaluation (for Faculty)		X	X

## Setting Priorities for Graduate Assistantships

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

Assistantship assignments will be based on the following criteria.

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

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

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

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

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

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

**assessments of their teaching. Teaching assistantships will generally be limited to a maximum of two years.**

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

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

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

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

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

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

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

**Texas Tech University**  
**Marriage and Family Therapy Program**

**Moving From the Master's Program to the Ph.D. Program.**

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

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

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

## RESIDENCY STATEMENT

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

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

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

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

## TTU MFT Graduate Program(s)

### Technology Policy

Neither the TTU Graduate School nor the TTU CMFT Graduate Programs have specific technology requirements for students in the program. However, we recommend that students have easy access to:

- A modern computer with internet access
- Word processing software
- Presentation software
- E-mail software
- Calendar software
- Web browsing software

Texas Tech IT Help Central offers guidance for students considering the purchase of computer hardware at <https://www.depts.ttu.edu/ithelpcentral/recommend/> .

Texas Tech University has site license software agreements with a large number of vendors, many of which provide free software to students. We strongly encourage students to take advantage of the site license for Microsoft Office 365. The software is free to students, provides the recommended software, and 1TB of cloud storage. A list of site licensed software and instructions for downloading the software is available at <http://www.depts.ttu.edu/itts/software/> .

All students have access to Advanced Technology Learning Centers (ATLC) or computing labs. The ATLCs provide access to computers with a wide range of productivity and statistical software. Information on the ATLCs can be found at <http://www.depts.ttu.edu/itts/labs/> . Students in the CMFT Graduate Programs also have access to the Human Sciences computer lab and technology services (<http://www.depts.ttu.edu/hs/technologyservices/index.php> ) and to computers in the TTU Family Therapy Clinic student room.

### Training

The TTU CMFT Graduate Programs do not require specific software or hardware training. However, basic familiarity with word processing, presentation, web browsing, and e-mail software is strongly recommended and will be necessary for successful completion of your degree. Individual courses will require creating written manuscripts and class presentations. Also, the vast majority of official University and CMFT Program communication will take place using e-mail. All TTU students are provided with an individual e-mail account. IT Technology Support offers a wide variety of technology

training to faculty and students at no cost (see <http://www.depts.ttu.edu/itts/training/shortcourses/index.php> )

Students will receive training in the use of the electronic client file management system used by the TTU Family Therapy Clinic during new student orientation and/or during clinical practicum. Training in the use of research/statistical software will take place as part of your required courses.

**SECTION V**  
**PLAN OF STUDY**

## GRADUATE COURSES REQUIRED IN THE MFT CURRICULUM

### **COURSES IN MARRIAGE AND FAMILY THERAPY (MFT)**

**MFT 5322. Family Systems (Foundational Curriculum).**

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

**MFT 5370. Issues in Professional Development (Foundational Curriculum).**

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

**MFT 5302. Family Therapy II (Foundational Curriculum).**

Prerequisite: Consent of instructor. Examination of post-modern models of family therapy with a focus on constructivist and constructionist theory.

**MFT 6303. Family Therapy III. [Couple/Sex Therapy] (Foundational Curriculum)**

Prerequisite: Consent of instructor. An examination of family influences on human sexual functioning, basic interactional assessment, and interventions for common sexual dysfunctions. Intervening in incestuous families and the role of addiction in sexual behavior.

**MFT 5305. DSM (Foundational Curriculum)**

This course will focus on the assessment and diagnosis of clinical and mental health concerns. Specific attention will be given to a relational/systemic framework for understanding diagnosis. However, students will be prepared to understand and apply traditional diagnostic classifications.

**MFT 5350. Introduction to Relational/Systemic Statistics (Foundational Curriculum)**

This course will focus on foundational statistics. The course is required for master's degree students and recommended for doctoral students without a graduate level statistics course.

**MFT 5351. Research Methods in Individual and Family Studies (Foundational Curriculum).**

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

**MFT 6311. Contemporary Directions in MFT**

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

**MFT 6320 Dyadic Data Analysis**

This course will focus on advanced quantitative methodologies for the statistical analysis of dyadic and relational data. Special attention will be given to the use of Structural Equation Modeling.

**MFT 6321 Longitudinal Data Analysis (Recommended Elective)**

This course will focus on advanced quantitative methodologies for the statistical analysis of longitudinal data. Special attention will be given to the analysis of longitudinal relational data.

**MFT 6322. Family Systems II.**

Advanced topics and issues in systems theory. Special focus on relational/systemic clinical research.

**MFT 6323. Qualitative Methods in MFT**

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

**MFT 6342 Advanced Family Therapy Topics - Grounded Theory (recommended elective)**

This course will focus on qualitative grounded theory research methodologies for use with relational/systemic data. Students will gain practical experience applying qualitative methods to their research with clinical populations and family therapy topics.

**MFT 6342 Advanced Family Therapy Topics – Lifespan Human Development (Foundational Curriculum)**

This course will focus on individual, couple, and family development across the lifespan from a relational/systemic perspective.

**MFT 6342. Advanced Family Therapy Topics.**

Prerequisite: Consent of instructor. Advanced topics in the field of family therapy that may include family therapy with special populations and recent developments in family therapy theory and application.

- **Gender, Violence, Grief/Loss, etc.** -

**MFT 6370. Diversity in MFT**

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

**MFT 6395. Practicum in Marriage and Family Therapy.**

Supervised experiences designed to prepare the student for involvement in marriage and family therapy and family life education. May be repeated for credit up to 30 hours. Doctoral students must have completed at least 500 face to face clinical contact hours (40% relational) to meet the requirements of the Foundational Curriculum.

**MFT 6396. Supervision of Marriage and Family Therapy.**

Prerequisite: Two years marriage and family therapy practicum and consent of instructor. Theory, research, and supervised practicum of family therapy supervision.

**MFT 6397. Supervision Practicum in Marriage and Family Therapy.**

Prerequisite: Completion of MFT 6396 or equivalent and consent of instructor. Course provides structured experience in supervision of marriage and family therapy students.

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

**MFT 7395. Internship in Marriage and Family Therapy.**

Prerequisite: Permission of Director of Marriage and Family Therapy Program. Full-time supervised internship in an appropriate setting. May be repeated for up to a minimum of 6 hours credit.

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

**TEXAS TECH UNIVERSITY**  
**DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SERVICES**

**MARRIAGE AND FAMILY THERAPY**  
**MASTER'S DEGREE**

**MASTER'S DEGREE (Leveling requirements for Doctoral Degree)**

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

**MARRIAGE AND FAMILY THERAPY (21 hours)**

	Semester	Hours
MFT 5322 Family Systems	_____	3
MFT 5305 DSM-IV	_____	3
MFT 5302 Family Therapy II [Intergenerational]	_____	3
MFT 5370 Issues in Professional Development	_____	3
MFT 6303 Family Therapy III [Couple/Sex]	_____	3
MFT 6342 Lifespan	_____	3
MFT 6370 Diversity	_____	3

**ELECTIVES (3 hours)**

Clinical or Research Elective	_____	3
-------------------------------	-------	---

**RESEARCH (6 hours)**

MFT 5350 Introduction to Statistics	_____	3
MFT 5351 Research Methods in MFT	_____	3

**CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (24 hours)**

MFT 5300 Intro to Clinical Practicum	_____	3
MFT 6395 Practicum	_____	21 min

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

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

**OTHER PROGRAM REQUIREMENTS (2 hours)**

MFT 7000 Advisor	_____	2
------------------	-------	---

<b>TOTAL M.S. Hours</b>		<b>65</b>
-------------------------	--	-----------

**TEXAS TECH UNIVERSITY**  
**DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SERVICES**

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

---

**MASTER'S DEGREE (Leveling requirements for Doctoral Degree)**

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

<b><u>MARRIAGE AND FAMILY THERAPY (21 hours)</u></b>	Semester	Hours
MFT 5322 Family Systems	_____	3
MFT 5305 DSM-IV	_____	3
MFT 5302 Family Therapy II [Intergenerational]	_____	3
MFT 5370 Issues in Professional Development	_____	3
MFT 6303 Family Therapy III [Couple/Sex]	_____	3
MFT 6342 Lifespan	_____	3
MFT 6370 Diversity	_____	3
<b><u>ELECTIVES (3 hours)</u></b>		
Clinical or Research Elective	_____	3
<b><u>RESEARCH (6 hours)</u></b>		
MFT 5350 Introduction to Statistics	_____	3
MFT 5351 Research Methods in MFT	_____	3
<b><u>CLINICAL PRACTICE AND PROFESSIONAL DEVELOPMENT (24 hours)</u></b>		
MFT 5300 Intro to Clinical Practicum	_____	3
MFT 6395 Practicum	_____	21 min
<b><u>ADDICTIVE DISORDERS AND RECOVER STUDIES (9 hours)</u></b>		
ADRS 6301 Couple and Family Dynamics of Addiction	_____	3
ADRS 6315 Systems Treatment of Addictions	_____	3
ADRS 6329 Eating Disorders and other Process Addictions	_____	3
<b><u>OTHER PROGRAM REQUIREMENTS (6 hours)</u></b>		
MFT 6000 Thesis	_____	6
<b>TOTAL M.S. Hours</b>		<b>69</b>

# MFT MASTERS CURRICULUM

## STUDENTS ENTERING THE PROGRAM (**Even Year Program Entry**) USUAL COURSE SEQUENCE

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

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	MFT 5300 Intro to MFT MFT 5322 – Family Systems MFT 6342 – Lifespan ADRS 6301 – Couple/Family Dynamics of Addiction	MFT 5302 – Intergenerational MFT 6370 – Diversity ADRS 6315 – Systemic Treatment of Addictions  MFT 6395 - Practicum	Elective or MFT 7000 as needed  Practicum – MFT 6395	Elective or MFT 7000 as needed  Practicum – MFT 6395

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	MFT 5305 – DSM MFT 5350 – Intro to Stats MFT 5370 – Ethics  MFT 6395 Practicum/ext.	MFT 5351 – Research Methods MFT 6303 – Couples & Sex (or other MFT) ADRS 6329 – Eating Disorders  MFT 6395 – Practicum/ext.	Elective or MFT 7000 as needed  MFT 6395 – Practicum/ext.	Elective or MFT 7000 as needed  MFT 6395 – Practicum/ext.

### ELECTIVES

Students must take **one course**.

# MFT MASTERS CURRICULUM

## STUDENTS ENTERING THE PROGRAM (**Odd Year Program Entry**) USUAL COURSE SEQUENCE

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

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	MFT 5300 Intro to MFT MFT 5370 – Ethics MFT 5322 – Family Systems ADRS 6301 – Couple/Family Dynamics of Addiction	MFT 5302 – Intergenerational MFT 6370 – Diversity ADRS 6329 – Eating Disorders  MFT 6395 - Practicum	Elective or MFT 7000 as needed  Practicum – MFT 6395	Elective or MFT 7000 as needed  Practicum – MFT 6395

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	MFT 5305 – DSM MFT 6342 – Lifespan MFT 5350 – Intro to Stats  MFT 6395 Practicum/ext.	MFT 5351 – Research Methods MFT 6303 – Couples & Sex (or other MFT) ADRS 6315 – Systemic Treatment of Addictions  MFT 6395 – Practicum/ext.	Elective or MFT 7000 as needed  MFT 6395 – Practicum/ext.	Elective or MFT 7000 as needed  MFT 6395 – Practicum/ext.

### ELECTIVES

Students must take **one course**.

# MFT MASTER'S (Thesis Option) CURRICULUM

## STUDENTS ENTERING THE PROGRAM (**Even Year Program Entry**) USUAL COURSE SEQUENCE

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

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	MFT 5300 - Intro to MFT MFT 5322 – Family Systems MFT 6342 – Lifespan ADRS 6301 – Couple/Family Dynamics of Addiction	MFT 5302 – Intergenerational MFT 6370 – Diversity ADRS 6315 – Systemic Treatment of Addictions  MFT 6395 - Practicum	Elective as needed  Practicum – MFT 6395	Elective as needed  Practicum – MFT 6395

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	MFT 5305 – DSM MFT 5350 – Intro to Stats MFT 5370 – Ethics  MFT 6395 Practicum/ext.	MFT 5351 – Research Methods MFT 6303 – Couples & Sex (or other MFT) ADRS 6329 – Eating Disorders  MFT 6395 – Practicum/ext.	Elective as needed  MFT 6395 – Practicum/ext.	Elective as needed  MFT 6395 – Practicum/ext.

YEAR	FALL	SPRING
3rd	MFT 6000 - Thesis	MFT 6000 - Thesis

### ELECTIVES

Students must take **one course**.

# MFT MASTER'S (Thesis Option) CURRICULUM

## STUDENTS ENTERING THE PROGRAM (Odd Year Program Entry) USUAL COURSE SEQUENCE

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

YEAR	FALL	SPRING	SUMMER I	SUMMER II
1st	MFT 5300 Intro to MFT MFT 5370 – Ethics MFT 5322 – Family Systems ADRS 6301 – Couple/Family Dynamics of Addiction	MFT 5302 – Intergenerational MFT 6370 – Diversity ADRS 6329 – Eating Disorders  MFT 6395 - Practicum	Elective as needed  Practicum – MFT 6395	Elective as needed  Practicum – MFT 6395

YEAR	FALL	SPRING	SUMMER I	SUMMER II
2nd	MFT 5305 – DSM MFT 6342 – Lifespan MFT 5350 – Intro to Stats  MFT 6395 Practicum/ext.	MFT 5351 – Research Methods MFT 6303 – Couples & Sex (or other MFT) ADRS 6315 – Systemic Treatment of Addictions  MFT 6395 – Practicum/ext.	Elective as needed  MFT 6395 – Practicum/ext.	Elective as needed  MFT 6395 – Practicum/ext.

YEAR	FALL	SPRING
3rd	MFT 6000 - Thesis	MFT 6000 - Thesis

### ELECTIVES

Students must take **one course**.

**TEXAS TECH UNIVERSITY  
DEPARTMENT OF COMMUNITY, FAMILY, and ADDICTION SCIENCES  
COUPLE, MARRIAGE, AND FAMILY THERAPY**

**DOCTORAL DEGREE**

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

<b><u>RESEARCH (15 hours)</u></b>	<b><u>Semester</u></b>	<b><u>Hours</u></b>
MFT 5350 Into Statistics (only if needed)	_____	3
MFT 6320 Dyadic Data Analysis (required)	_____	3
MFT 6323 Qualitative Methods (required)	_____	3
MFT 6322 Family Systems II - Research Methods (required)	_____	3
MFT 6342/6321 Longitudinal Data Analysis	_____	3
MFT 6342 Grounded Theory	_____	3

Students may take other research courses to complete the non-required elements with approval of the program director. Examples include HDFS 6364 or HDFS 6365

**MARRIAGE AND FAMILY THERAPY (15 hours)**

MFT 6370 Diversity in MFT (required)	_____	3
MFT 6311 Contemporary Directions in MFT (required)	_____	3
MFT 6396 MFT Supervision (required)	_____	3
MFT 6342 MFT Seminar – (e.g. Mindfulness)	_____	3
MFT 6342 MFT Seminar – (e.g., Violence)	_____	3

**ADVANCED PRACTICE COMPONENT (42 hours)**

MFT 6395 Clinical Practicum	_____	12 min.
MFT 6397 Sup. Practicum	_____	12 min.
MFT 7395 Internship	_____	6
MFT 8000 Dissertation	_____	12 min.

**ELECTIVE COURSES (3 hours)**

Elective	_____	3
----------	-------	---

Students should select elective courses which support the advancement of clinical, supervision, research, or college level instructional skills. Electives must be approved by the program director.

**OTHER PROGRAM REQUIREMENTS (3 hours)**

MFT 7000 Advisor	_____	3
------------------	-------	---

**TOTAL Ph.D. HOURS 78**

**PROJECTED DATE FOR DOCTORAL PORTFOLIO:**                      Fall      Spring      20\_\_\_\_

**PROJECTED DATE FOR GRADUATION:**                              Fall      Spring      20\_\_\_\_

# MFT DOCTORAL CURRICULUM

## STUDENTS ENTERING THE PROGRAM (**Even Year Program Entry**) USUAL COURSE SEQUENCE

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

YEAR	FALL 2016	SPRING 2017	SUMMER I 2017	SUMMER II 2017
1 <sup>st</sup>	MFT 5350 Intro Stats (if needed) MFT 6311 Contemporary Family Therapy MFT 6342 Longitudinal Data Analysis  MFT 6395 Practicum	MFT 6370 Diversity MFT 6320 Dyadic Data Analysis MFT 6342 Seminar (Mindfulness)  MFT 6395 Practicum	MFT Seminar OR Elective (if needed)   MFT 6395 - Practicum	MFT Seminar OR Elective (if needed)   MFT 6395 Practicum

YEAR	FALL 2017	SPRING 2018	SUMMER I 2018	SUMMER II 2018
2 <sup>nd</sup>	MFT 6396 Supervision of MFT MFT 6323 Qualitative Methods  MFT 6397 Supervision Practicum	MFT 6322 MFT Research MFT 6342 Grounded Theory MFT 6342 Seminar (Violence)  MFT 6397 Supervision Practicum	MFT Seminar OR Elective (if needed)   MFT 6397 Sup. Practicum	MFT Seminar OR Elective (if needed)   MFT 6397 Sup. Practicum

YEAR	FALL 2018	SPRING 2019	SUMMER I 2019	SUMMER II 2019
3 <sup>rd</sup>	MFT 8000 Dissertation  MFT 7395 Internship	MFT 8000 Dissertation  MFT 7395 Internship	MFT 8000 – Dissertation  MFT 7000 (if not taken previously)	MFT 8000 - Dissertation COMPLETE PH.D.

**ELECTIVES:** Doctoral students are required to take **ONE ELECTIVE**.

Electives may be selected from graduate level courses that clearly advance the students' knowledge/skills related to advanced clinical practice, clinical supervision, research, college level instruction, grant writing, or advanced clinical theory.

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

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

# MFT DOCTORAL CURRICULUM

## STUDENTS ENTERING THE PROGRAM (**Odd Year Program Entry**) USUAL COURSE SEQUENCE

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

YEAR	FALL 2015	SPRING 2016	SUMMER I 2016	SUMMER II 2016
1 <sup>st</sup>	MFT 5350 Intro Stats (if needed) MFT 6311 Contemporary Family Therapy MFT 6323 Qualitative Methods  MFT 6395 Practicum	MFT 6370 Diversity MFT 6342 Grounded Theory MFT 6342 Seminar (Violence)  MFT 6395 Practicum	MFT Seminar OR Elective (if needed)   MFT 6395 - Practicum	MFT Seminar OR Elective (if needed)   MFT 6395 Practicum

YEAR	FALL 2016	SPRING 2017	SUMMER I 2017	SUMMER II 2017
2 <sup>nd</sup>	MFT 6396 Supervision of MFT MFT 6342 Longitudinal Data Analysis  MFT 6397 Supervision Practicum	MFT 6322 MFT Research MFT 6320 Dyadic Data Analysis MFT 6342 Seminar (Mindfulness)  MFT 6397 Supervision Practicum	MFT Seminar OR Elective (if needed)   MFT 6397 Sup. Practicum	MFT Seminar OR Elective (if needed)   MFT 6397 Sup. Practicum

YEAR	FALL 2017	SPRING 2018	SUMMER I 2018	SUMMER II 2018
3 <sup>rd</sup>	MFT 8000 Dissertation  MFT 7395 Internship	MFT 8000 Dissertation  MFT 7395 Internship	MFT 8000 – Dissertation  MFT 7000 (if not taken previously)	MFT 8000 - Dissertation COMPLETE PH.D.

**ELECTIVES:** Doctoral students are required to take **ONE ELECTIVE**.

Electives may be selected from graduate level courses that clearly advance the students' knowledge/skills related to advanced clinical practice, clinical supervision, research, college level instruction, grant writing, or advanced clinical theory.

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

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

**COURSE SEQUENCE CHART**

	<b>FALL</b>	<b>SPRING</b>	<b>SUMMER I</b>	<b>SUMMER II</b>
<b>Year 1</b>				
<b>Year 2</b>				
<b>Year 3</b>				
<b>Year 4</b>				
<b>Year 5</b>				

**DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES  
MARRIAGE AND FAMILY THERAPY PROGRAM**

**PLAN OF STUDY/EXAMINATION MEETING**

**PRELIMINARY EXAMINATION**

The purpose of the Plan of Study/Examination meeting is to:

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

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

I. In preparation for the formal meeting in the Spring:

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

**EXAMPLE**

**TEXAS TECH UNIVERSITY–THE GRADUATE SCHOOL  
PROGRAM FOR THE MASTER’S DEGREE AND ADMISSION TO CANDIDACY**

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

CIP Code: \_\_\_\_\_ Date: \_\_\_\_\_

Full legal name: \_\_\_\_\_ Student R.#: \_\_\_\_\_

Current mailing address (include zip code): \_\_\_\_\_

Degree sought: MS Major: MFT Expected Graduation Date: \_\_\_\_\_

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

Circle one: **Non-Thesis**

Thesis (Complete committee and thesis title sections below–**not** for report option.)

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

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

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

<u>Major</u> 18-hr. min.	<u>Minor</u> 6-hr. min. (if declared)	<u>Tool or</u> <u>Language</u> (if required)	<u>Leveling</u> (if required)	<u>Transfer</u> <u>Course#*</u> Institution	TTU equiv. #*
-----------------------------	---	--	----------------------------------	---	---------------

- |                  |                             |  |  |  |  |
|------------------|-----------------------------|--|--|--|--|
| <b>ADRS 5310</b> | <b>MFT 6395 (12)</b>        |  |  |  |  |
| <b>MFT 5322</b>  | <b>ADRS 6301</b>            |  |  |  |  |
| <b>PSY 5338</b>  | <b>ADRS 6315</b>            |  |  |  |  |
| <b>MFT 5302</b>  | <b>ADRS 6329</b>            |  |  |  |  |
| <b>MFT 5304</b>  | <b>MFT 7000 (2)</b>         |  |  |  |  |
| <b>MFT 5370</b>  | <b>HDFS 5321 (elective)</b> |  |  |  |  |
| <b>MFT 6303</b>  |                             |  |  |  |  |
| <b>MFT 5351</b>  |                             |  |  |  |  |
| <b>MFT 5300</b>  |                             |  |  |  |  |

\*In order for transfer courses to be entered on the TTU transcript, courses must be given the TTU equivalent number. For example, MGMT 630 at TAMU may be equivalent to MGT 5371 at TTU. Please indicate when course was (or will be) taken and provide an official transcript to the Graduate School. No more than 6 hours may be transferred on a 36-hr., and 9 on a 45-hr program. Grades from transfer courses will not appear on TTU transcripts. Grades below B are not accepted on transfer work.

Signature of Graduate Advisor of major department

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

Graduate Dean

Date

Approved [ ]

Conditional Approval [ ]

Not Approved [ ]

Remarks or Conditions of Approval: \_\_\_\_\_

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

**TEXAS TECH UNIVERSITY  
DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SCIENCES  
MFT PROGRAM**

**REPORT OF PRELIMINARY EXAMINATION**

**Name** \_\_\_\_\_ **Date** \_\_\_\_\_

**I. Committee Members Attending:**

\_\_\_\_\_ (Chairperson) \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

**II. Strengths:**

**III. Concerns:**

**IV. Plan for Remediation:**

**V. MFT Faculty Action:**

\_\_\_\_\_ Continuation in Program Recommended  
\_\_\_\_\_ Conditional Continuation Recommended (letter attached)  
\_\_\_\_\_ Continuation in Program Not Recommended (letter attached)

**VI. Approved:** \_\_\_\_\_

MFT Program Director

**Transfer of Client Hours from Work completed  
Prior to Doctoral Program**

Student's Name \_\_\_\_\_

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

Name of Program \_\_\_\_\_

Program Director \_\_\_\_\_

(Attach verifiable form signed Program Director)

B. For work completed and supervised by AAMFT Approved Supervisor

Location where therapy completed \_\_\_\_\_

Approved Supervisor \_\_\_\_\_

(Attach verification signed by Approved Supervisor)

<u>Client Contact</u>	<u>Supervision</u>
Individual _____	Individual-Live _____
Couple _____	Individual-Audio _____
Family _____	Individual – Video _____
Group Individual _____	Individual – Case Note _____
Group Couple _____	Group-Live _____
Group Family _____	Group-Audio _____
Total Hours _____	Group-Video _____
	Group-Case Note _____
	Total Hours _____

Accepted by \_\_\_\_\_ on \_\_\_\_\_  
(TTU Program Director ) (Date)

Entered into TTU computer records by \_\_\_\_\_ on \_\_\_\_\_

When complete, place in student's clinical file in MFT Secretary's office with documentation attached.

TEXAS TECH UNIVERSITY  
The Graduate School

STATEMENT OF INTENTION TO GRADUATE

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

<https://www.depts.ttu.edu/gradschool/private/default.aspx>

**IMPORTANT!!!** – Pay specific attention to the published deadlines for submitting the intent to graduate. Late submissions will not be accepted and this will delay your graduation. Important deadlines for the Graduate School may be found at:

<https://www.depts.ttu.edu/gradschool/students/current/deadlines-grad201657.php>

**SECTION VI**  
**QUALIFYING EXAMINATION**

## MFT Program Comprehensive Examination (Master's Portfolio)

### I. Purpose of the Comprehensive Examination

The portfolio provides an opportunity for students to document a variety of developmental activities relevant to the broad range of skills and experiences encompassed within their Master's training. The portfolio requirements are designed to reflect students' competencies and accomplishments as they matriculate through the course of their training and consequently provides a record of their emergence as scholars. The portfolio is created throughout the duration of the student's Master's studies. Progress is evaluated annually by the student's advisory committee and serves as a means to determine the progress of the student in fulfilling the requirements for their degree and in the pursuit of their post-graduate goals

### II. Role of Faculty

The full-time members of the MFT Faculty in residence that semester will serve as the comprehensive examination committee for MFT students. The portfolio is to represent the student's own work and is to be done independently. It is assumed that the student has received faculty feedback on her/his work during coursework and supervision. Students should work closely with their faculty advisor to complete the portfolio. The student's advisor may provide editorial feedback on the elements of the portfolio. The Program Director will also have an information meeting on the Master's portfolio during the Spring semester and as needed based on Masters' students' projected completion dates.

Faculty shall treat comprehensive examination results as confidential. One copy of the Master's portfolio will be kept in the MFT office as part of our official records. Students may show other students their own copy of their Master's portfolio after the quals process is finished.

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

### III. Timing of the Qualifying Examination

Students must submit the Master's portfolio for review as the comprehensive examination prior to proposing a master's thesis (students completing a master's thesis will complete all components of the portfolio with the exception of Part II Track A, thesis component, and add the thesis component when the thesis is complete) or prior to graduation for non-thesis track students. Typically, students will submit the completed portfolio for evaluation by the committee between the end of the second Spring semester of classes and the end of the

Summer II semester of the second calendar year of study. Students must have completed most their clinical hours for the program, and the bulk of their coursework before submitting the portfolio. Generally, the earliest it is feasible to take quals is the end of the second Spring semester and the latest is during the Fall of the third calendar year of study.

#### IV. Criteria for Scoring

Once the Master's portfolio is turned in the program, the faculty will independently score the portfolio within two weeks of submission. Faculty will score the portfolio as "passing with honors (4), passing (3), resubmit with changes (2), or fail (1). At the next scheduled faculty meeting, following the two week review period, faculty scores will be recorded and averaged. An average score of 3 or better is required to pass. A score of two or greater but less than 3 will require changes and resubmission. A score less than 2 will require the student to make significant changes to the portfolio and resubmit no sooner than six months after the original submission date. A score of less than 2 for the second submission may result in dismissal from the program.

## ELEMENTS OF THE MASTER'S PORTFOLIO

---

### PART I: CLINICAL PROFICIENCY

---

**PROGRAM GOAL:** Students will be qualified to provide Couple, Marriage, and Family Therapy from a relational/systemic perspective.

---

#### REQUIRED COMPONENTS:

**Theory of Therapy:** Students will write a theory of therapy paper describing her/his therapeutic approach and models incorporation. Elements of the Theory of Therapy Paper include:

- Clearly articulate an advanced understanding of a relational/systemic clinical model or model(s) (epistemological integration should be addressed when multiple models are applied).
- Discuss the epistemological assumptions consistency with core Systems Theory assumptions.
- Discuss the intersection of the epistemological assumptions with contextual factors (ethnicity, gender, sexual orientation, SES, etc.)
- Discuss the application of systemic/relational ethics.
- Provide a case study of the application of the model.

**Note:** Elements of the Theory of Therapy paper will be developed during assignments for MFT 6395 Clinical Practicum.

#### Required Documentation:

- Append a copy of the Theory of Therapy paper.

**Clinical Observation:** Student will have a formal observation, should be live, and assessment of a relational case completed by two separate MFT faculty.

**Note:** This requirement should be completed in conjunction with MFT 6395 Clinical Practicum. Both cases observed should be relational.

#### Required Documentation:

- Include copies of the observation assessments that indicates clinical competency (see attached observation forms).

#### OPTIONAL, BUT ENCOURAGED, COMPONENT:

**National Licensing Exam:** Student will take and obtain a passing score for the national LMFT licensing exam.

#### Required Documentation:

- Provide Documentation Of The Passing Score For The LMFT Exam.
- Provide A Copy Of Your State License.

---

## PART II: SCIENCE-INFORMED PERSPECTIVE

---

**PROGRAM GOAL:** Students will be prepared to operate from a science-informed perspective.

---

COMPLETE AND DOCUMENT ONE OF THE FOLLOWING TRACKS: Students in the Master's program will complete one of the following tracks to demonstrate their ability to operate from a science-informed perspective. Students will either complete either Track A or Track B.

TRACK A: THESIS TRACK REQUIRED COMPONENTS:

**Thesis:** Student will complete and successfully defend her/his Master's Thesis.

**Note:** See Program Manual for description of requirements for completing the thesis requirements.

Required Documentation:

- Provide a copy of the Thesis title page and abstract.
- Provide a copy of the signed document indicating the committee approves the final document.

TRACK B: RESEARCH TRACK REQUIRED COMPONENTS:

**Data-Based Assessment of Clinical Outcomes:** Student will empirically analyze client progress and provide a report.

**Note:** This requirement will be completed as part of the MFT 5350: Intro to Family Systems Statistics course or as part of MFT 6395 Clinical Practicum.

TRACK B: RESEARCH TRACK – DOCUMENT ONE OF THE FOLLOWING COMPONENTS:

**Publication:** Students will have one peer-reviewed manuscript for publication:

- One article accepted in a peer-reviewed journal by the time of portfolio submission.
- The article should incorporate a relational/systemic/clinical component. This can be a focus on family processes, incorporating dyadic data, or addressing clinical implications.

**Note:** Open-sourced or paid publications do not meet the publication requirement.

Required Documentation:

- Citations for all publications.

- Append most recent manuscripts (submitted, revised-for-resubmission, published).
- Append all correspondence with journal, including editorial feedback.
- Append evidence that the journal is peer reviewed.

**Presentations:** The student will present two peer-reviewed works in a professional capacity at the local/state/national/international level. The presentations can be in any format (i.e., poster presentation/research discussion/workshop).

Required Documentation:

- Citations of all presentations.
- Append a copy of acceptance letters.
- Append presented copies and/or handouts.
- Append a copy of program pages.

**Additional Research Training:** Student will attend at least one research training event.

*Additional research training can be in one or more of the following formats:*

- Attendance to a workshop training (e.g., quantitative or qualitative statistical training, neurophysiological training) equivalent to at least a one-day workshop (or 3 hours of training).
  - For example, see <http://www.statscamp.org/>
- Enrollment in an additional statistical or research based course for credit above her/his degree plan requirements.

Required Documentation:

- If enrolling in a statistical workshop or training event, student should provide a copy of registration information, certificate of attendance, and description of the event including a description of the topics covered.
- If enrolling in an additional course, student should provide a copy of her/his syllabus and proof on transcript of her/his enrollment in the course.

---

### PART III: INTEGRATION OF ADDICTION AND RECOVERY SCIENCE

---

**PROGRAM GOAL:** Students will integrate addiction and recovery science in their clinical practice.

---

REQUIRED COMPONENTS:

**Integration of Addiction and Recovery Science in Theory of Therapy:** Student will integrate how s/he approaches, assesses, and treats addiction and recovery in therapy in her/his theory of therapy paper.

**Integration of Addiction and Recovery Science and Relational/Systemic Ethics in Theory of Therapy:** Students will specifically address the application (Challenges, Unique Ethical Considerations, etc.) of relational/systemic ethics to clinical work with addiction and recovery.

**Note:** This requirement will be completed as part of MFT 6395 Practicum.

Required Documentation:

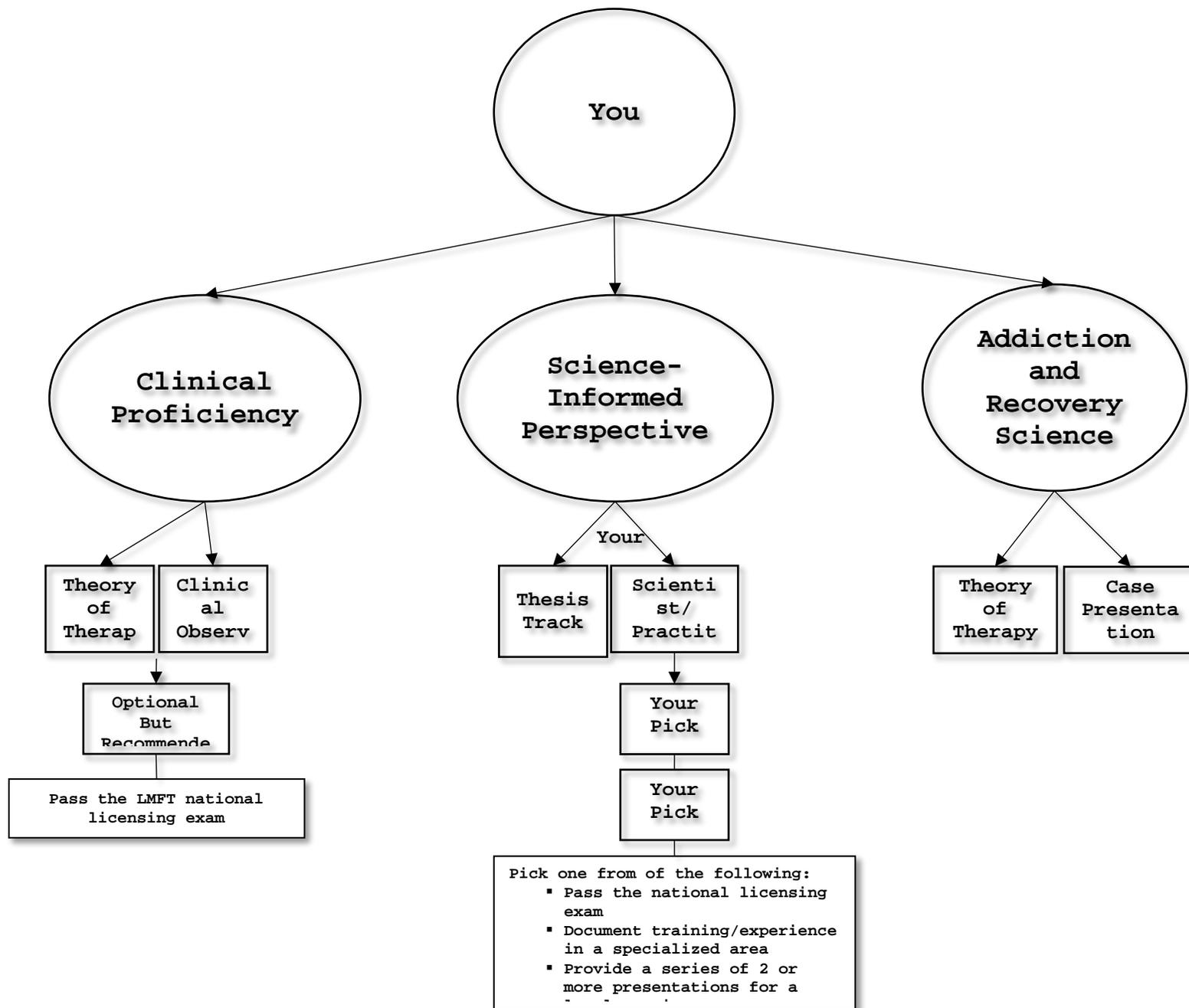
- Include in appended copy of the Theory of Therapy paper.

**Complex Case Presentation:** Student will be involved with at least one ongoing therapy case with an addiction or recovery focus (recommended 10 hours of direct therapy or of a team case with an addiction/recovery focus). Student will complete a complex case assignment based on addiction and recovery science.

**Note:** This requirement will be completed as part of MFT 6395 Practicum.

Required Documentation:

- Append copy of the complex case paper.





**MASTER'S PORTFOLIO RUBRICS/FORMS**  
**Theory of Therapy Paper (Part I) Rubric**

<b>Paper Sections:</b>	<b>Key Questions Addressed:</b>	<b>Points Accrued (10 points):</b>
<b>Definition, Therapeutic Relationship</b>	What is therapy? What brings people to therapy? How is the therapeutic relationship established? What therapeutic aspects would be important to you?	___ out of 2
<b>Power/Influence of Therapist</b>	What is the role/responsibility/power or influence of the therapist on the client system? What is your social location and how might that benefit or challenge you in the room with certain clients? How do you incorporate the 'use of self' in therapy (i.e., How you use observations/intuition/impressions/hunches in session)?	___ out of 2
<b>Family of Origin</b>	How does your family of origin inform and influence what you attend to most and possibly avoid in the room with clients? Consider, identify, and describe your role/position in your family of origin, the systemic nature of your FOO (open/closed/rigid/permissive) and how your family experiences have influenced your awareness in the room with clients (describe what might grab your attention most during session or areas which you might inadvertently overlook or become overwhelmed by). What client interactions/presenting problems/situations have been most challenging for you so far? And why?	___ out of 2
<b>Defining Health/Wellness &amp; Creating Change</b>	How do you define individual, relational and family health/wellness/functioning or lack thereof? How important are emotions, thoughts, behaviors, insight/self-awareness or action in understanding client problems? Do you value one of these elements more than the other or how do you see them as connected? What factors contribute to client change, resolving problems, and/or achieving greater functioning?	___ out of 2
<b>Personal Genogram (appendix)</b>		___ out of 1
<b>Overall Writing Flow/Quality/Organization</b>		___ out of .5
<b>APA Format (8 page, typed/double spaced/references)</b>		___ out of .5

\*Part I is 10% of practicum grade

## **Theory of Therapy Paper PART II Description**

This assignment is one that will build upon itself during your clinical training. A Final Portfolio which will include a theory of therapy/case application will serve as the clinical component of your portfolio during your second summer in the program (see program manual for details).

### Theory of Therapy Paper PART II Rubric (10 points)

Paper Sections:	Key Questions Addressed:	Points Accrued:
Epistemology	<b>What epistemology/theory of knowledge</b> serves as the foundation of how you make sense of the world (e.g., Objectivist, Constructivist, Reductionism, Transcendental idealism, etc.)?	___ out of 1
Primary Model & Systems Theory	<b>What model or models of therapy do you most closely identify with?</b> And how is systems theory embedded within your model? How is systems theory important in understanding a client system?	___ out of 1
Key Assumptions/Terms/Concepts	<b>Identify the primary assumptions, terms, concepts of your model(s).</b> If you identify with more than one model, in what ways are they congruent with one another and in what ways do they contrast each other? How do you integrate the models or in what ways do you diverge from the original theory when in the room with clients?	___ out of 2
Integration of Addiction/Recovery Model to Theory	<b>Identify the presence of substance and/or process addictions</b> within the family system and discuss ways in which your model addresses the role/function of addiction.	___ out of 1
Diverse Clients	<b>How does your theory guide your work w/different constellations?</b> Presenting problems? Or diverse clients? Marginalized clients? You should speak to gender, power, sexual orientation, and working with persons living with cognitive challenges/limitations?	___ out of 2
Problem Definition, Goals & Interventions	<b>How does your theory of therapy define/identify/assess problems, set/establish goals?</b> What interventions are used to create change?? Who determines when therapy should be terminated? What factors reflect successful completion of therapy?	___ out of 2
Overall Writing Flow/Quality/Organization		___ out of .5
APA Format (8 page, typed/double spaced/references)		___ out of .5

\_\_\_ out of 10 points

### Theory of Therapy Paper PART III Rubric

Paper Sections:	Key Questions Addressed:	Points Accrued ( points):
Case Overview	Identify and describe a clinical couple or family system and include all pertinent demographic case information; including potential diagnoses, health factors, addiction history, risks issues (e.g., suicidality, homicidality, intimate partner violence, child/elder abuse), ethical dilemmas faced (dual relationships, confidentiality, reporting), and diversity components.	___ out of 1
Theoretical Application of Model	Apply your theory of therapy to the clinical case by using specific theoretical terms, assumptions, and concepts which are evident in your description of the processes that took place in the therapy room. Avoid repeating theoretical content that is previously addressed in Part I & II. Specific examples of what you did or said in the room, patterns/dynamics exhibited by clients, and the interaction between you and your clients should be included; demonstrating how they are tied to the terms and concepts rooted in your model.	___ out of 2.75
Conclusion/Takeaway	Identified ways model was ideal and most challenging for use client system, things you would do differently, what you learned, role of supervision	___ out of .25
Genogram (appendix)		___ out of .5
Treatment Plan (appendix)		___ out of .5
Overall Writing Flow/Quality/Organization		___ out of .25
APA Format (10 page, typed/double spaced/references)		___ out of .25

\*\*\*Part III is worth \_\_\_% of your practicum grade.

**Clinical Observation Form  
M.S. in MFT**

Name: \_\_\_\_\_ Date of Observation: \_\_\_\_\_

Observer: \_\_\_\_\_ Location of Observation: \_\_\_\_\_

Session Number: \_\_\_\_\_ Modality: \_\_\_\_\_

Number, Relationships, & Ages of Clients in Session: \_\_\_\_\_

Please assess ***the student's observed abilities*** by responding to the following items using the following six-point scale (commensurate with expectations for students at this respective stage of development):

- 1 - **excellent**
- 2 - **very good**
- 3 - **good**
- 4 - **adequate**
- 5 - **poor**
- 6 - **very poor**

**Case Management**

- \_\_\_ Consent Forms completed in accordance with clinic policy
- \_\_\_ ROI completed in accordance with clinic policy
- \_\_\_ Case Note completed in accordance with clinic policy
- \_\_\_ Case Note content reflects content and process observed
- \_\_\_ Treatment Plan completed in accordance with clinic policy
- \_\_\_ The problems of focus and related intervention agenda are defined in treatment plan
- \_\_\_ Treatment Plan reflects areas of emphasis in observed session
- \_\_\_ Fees and payment history are documented in accordance with clinic policy

**Clinical Engagement**

- \_\_\_ Is punctual in beginning session
- \_\_\_ Is punctual in concluding session
- \_\_\_ Empathic ability
- \_\_\_ Listening ability
- \_\_\_ Ability to develop rapport
- \_\_\_ Ability to join
- \_\_\_ Balances Attention among all attendees

**Assessment, Case Conceptualization & Clinical Theory**

- \_\_\_ Utilizes client report to define clinical focus

- Utilizes personal observation of both individual and interactive material to define clinical focus
- Utilizes assessment and other written case data
- Multi-partiality
- Diagnostic Interviewing skills
- Assesses for substance abuse / dependence
- Assesses for process addiction
- Assesses for client welfare & safety
- Assesses for interpersonal violence & aggression
- Assesses for minor and/or challenged adult exploitation, neglect & abuse
- Case Formulations consistently reflect a systemic clinical model
- Case Formulations reflect an advanced application of clinical theory

### **Clinical Intervention**

- Ability to provide feedback and suggestions
- Ability to promote client growth/change
- Interventions are consistent with treatment plan content
- Interventions reflect a systemic orientation to clinical problems
- Interventions are consistent with espoused clinical model
- Interventions are relevant to identified client problems
- Intervenes (if indicated) to promote client safety
- Interventions reflect an advanced command of systemic clinical theory

### **Awareness and Integration of Addiction / Recovery Science**

- Observed conduct in session is consistent with current literature and findings relevant to the study of addiction and recovery

### **Awareness and Integration of Relevant Clinical & Empirical Literature**

- Observed conduct in session is consistent with current literature and findings relevant to the problems of concern
- Observed conduct in supervision reflects interest in relevant literature and findings
- Clinical conduct and case conceptualization are informed by the available clinical and empirical literatures
- Clinical experiences are influential in student's research agenda
- Student research agenda is influential on student's clinical experiences and development

### **Openness to Supervision, Self of Therapist, & Collegial Relationships**

- Clinical Identity is clearly within the field of Marriage and Family Therapy
- Receptivity to Feedback
  - Integration of Feedback into clinical activity
- Recognition of personal limitations
- Self confidence
- Investment in Collegial Atmosphere

- Awareness of relevant personal issues
- Management of Personal Emotions
- Management of Client Conflict
- Management of Clinical Boundaries
- Openness to Refer
- Openness to consultation & collaboration

**Ethics, Contextual Factors, and Legal Issues in Clinical Practice**

- Professional Boundaries
- Sensitivity to individual differences
- Sensitivity to gender issues
- Sensitivity to racial issues
- Sensitivity to ethnic issues
- Sensitivity to personal issues
- Comprehension of relevant ethical standards
- Comprehension of relevant legal issues

### Data-Based Assessment of Clinical Outcomes Description and Rubric

**Instructions:** As therapists, we often gather information about our clients and their progress in our assessments. It's important that we understand what that information means, and how to analyze that information. It can be a helpful tool to be able indicate the effectiveness of your work, or to understand what factors affect your clients. In private practice, you should use this information to analyze client progress in treatment, and you can even use this information to advertise to clients the overall effectiveness of your work. You will each obtain a copy of the questionnaire given to clients at their intake session, and assessed throughout treatment here at the TTU Family Therapy Clinic. You will identify an outcome from your clients that you are interested in analyzing, and conduct the respective analysis. You will present this empirical analysis of client progress in a report in the form of a Method section of a publishable paper. You will write up a Method section of a paper, that includes a description of the population (your client sample, including age, race, gender, constellation, etc.), describes each measure that you are interested in using, provides a data analysis plan describing what you examined and through what statistical analyses, and presents the results from the analyses. The data analysis plan should describe the statistical analysis you are going to use, to identify the assumptions of that analysis, and to identify how it fits with your research question and measures of interest. The results should be written up in the form of a results section and should include all figures and tables to display results consistent with the analysis you performed. All steps of the analysis should be explored and explained. (Please include with your assignment a print-out of the final results you are reporting)

MFT 5350 Data-Based Assessment of Clinical Outcomes Rubric				
Components	Exceeded Expectations – 9-10 points	Met Expectations – 7-8.9 points	Below Expectations – 5-6.9 points	Deficient – 4.9 points and below
Research Question of Interest – 10 points	Research question meets all the following criteria: <ul style="list-style-type: none"> <li>- Identify independent (predictor) and dependent (outcome) variables                             <ul style="list-style-type: none"> <li>o Accurately identify scale of measurement of</li> </ul> </li> </ul>	Research question is lacking in 1 of the criteria. Notes:	Research question is lacking in 2 of the criteria. Notes:	Research question is lacking in more than 2 of the criteria. Notes:

	<p>each variable being examined</p> <ul style="list-style-type: none"> <li>- Research question includes items or questions from the questionnaire for the TTU Family Therapy Clinic</li> <li>- Research question written in the form of a question, includes null and alternate hypothesis</li> </ul>			
Corresponding Analysis – 10 points	<p>Corresponding analysis meets all the following criteria:</p> <ul style="list-style-type: none"> <li>- Analysis appropriate given the scale of measurement of each variable being examined</li> <li>- Analysis type is best fit with research question</li> <li>- Analysis type takes advantage of the richness of the data available</li> </ul>	<p>Corresponding analysis is lacking in 1 of the criteria. Notes:</p>	<p>Corresponding analysis is lacking in 2 of the criteria. Notes:</p>	<p>Corresponding analysis is lacking in more than 2 of the criteria. Notes:</p>
Description of the sample – 10 points	<p>Description of the population (your caseload that are being included in the analyses) meets all the following criteria:</p> <ul style="list-style-type: none"> <li>- Which participants would you be examining? Subsample of the whole clinic sample?</li> <li>- Describe the process of clients receiving the survey</li> </ul>	<p>Description of the population is lacking in 1 of the criteria. Notes:</p>	<p>Description of the population is lacking in 2 of the criteria. Notes:</p>	<p>Description of the population is lacking in more than 2 of the criteria. Notes:</p>

	<ul style="list-style-type: none"> <li>- Who is taking and responding to the survey? Which session is the survey administered? Who administers the survey?</li> </ul>			
Description of each measure – 10 points	<p>Description of each measure meets all the following criteria:</p> <ul style="list-style-type: none"> <li>- Specify source of the item or scale (primary resource if the Family Therapy Clinic is using a validated measure)</li> <li>- Include an example question to display question wording</li> <li>- Identify answer categories/scale of question</li> <li>- How questions were coded</li> <li>- Identify reliability and validity of scale if measure is validated</li> </ul>	<p>Description of each measure is lacking in 1 of the criteria. Notes:</p>	<p>Description of each measure is lacking in 2 of the criteria. Notes:</p>	<p>Description of each measure is lacking in more than 2 of the criteria. Notes:</p>
Data Analysis Plan – 10 points	<p>Data analysis plan meets all the following criteria:</p> <ul style="list-style-type: none"> <li>- Identify the assumptions of that analysis</li> <li>- Identify how it fits with research question</li> <li>- Identify how it fits with measures of interest</li> <li>- All steps of analysis explored and explained</li> </ul>	<p>Data analysis plan is lacking in 1 of the criteria. Notes:</p>	<p>Data analysis plan is lacking in 2 of the criteria. Notes:</p>	<p>Data analysis plan is lacking in more than 2 of the criteria. Notes:</p>

Results Section – 10 points	<p>Results section meets all of the following criteria:</p> <ul style="list-style-type: none"> <li>- Results are presented following APA standards</li> <li>- Results are accurate to the analysis conducted</li> <li>- All parts of the results are presented</li> <li>- Results are described in a manner consistent with what they indicate</li> </ul>	Results section is lacking in 1 of the criteria. Notes:	Results section is lacking in 2 of the criteria. Notes:	Results section is lacking in more than 2 of the criteria. Notes:
Tables and Figures – 10 points	<p>Tables and figures meets all of the following criteria:</p> <ul style="list-style-type: none"> <li>- Tables and figures are displayed in APA formatting</li> <li>- Tables and figures convey all the pertinent information that should be included</li> <li>- Tables and figures are easy to read and free of grammatical errors/typos</li> </ul>	Results section is lacking in 1 of the criteria. Notes:	Results section is lacking in 2 of the criteria. Notes:	Results section is lacking in more than 2 of the criteria. Notes:

*Additional Feedback:*

## Complex Case Paper/Presentation Description

You will type a brief overview (2 pages max) of a ***couple or family*** you are currently seeing in the clinic. The description will include demographic and background information, treatment plan/goals and examples of how you are applying your model in session. During pre-practicum planning, you will present the overview information and the specific challenges you are experiencing (~5-10 min) to the group for them to ask questions and offer feedback on the case (5 min). You will include a genogram of the family system ***and provide a copy for the team*** which highlights key patterns as well as the nature of the relationships (close, distant, estranged/cut-off), health history, addiction/substance abuse patterns, household membership, deaths, divorce, etc. – see rubric **(5% of 25%)**

### Complex Case Summary Paper/Presentation Rubric (5%)

Students will take turns presenting an existing ***couple or family*** case to the team during the group supervision portion of practicum. Case presentations should include a brief description of the family (ages, role, length of relationship, ethnicity, genogram, and any other essential information), presenting problem, stage in therapy (session number to date), goals, a treatment plan for achieving goals, challenges or issues you would like the team to focus on during your presentation.

***A written version of this information will be turned in to the instructor on the day you are scheduled to present, and will be graded according to the criteria described below.*** Summary papers should be no longer than 2 pages (typed) unless absolutely necessary (quality, not quantity please).

#### Grading Rubric for Complex Case Assignment:

<b>PAPER</b>	<b>(4 POINTS)</b>
Inclusion of relevant case information <u>and</u> attach a genogram (age, roles, relationship length, ethnicity, abuse history, addiction history, and other important details)	<b>1 pt. ____</b>
Brief description of presenting problem	<b>.25 pts. ____</b>
Case conceptualization (From the perspective of your theory of therapy) <ul style="list-style-type: none"> <li>• Including use of assumptions, terms/constructs, and interventions applied to case</li> </ul>	<b>1.5 pts. ____</b>
Treatment plan / goals/strategy for achieving therapeutic goals <ul style="list-style-type: none"> <li>• Use AMD template for treatment plan</li> <li>• The Child/Adolescent/Family/or Couple Treatment Planner books are recommended</li> </ul>	<b>1 pts. ____</b>
Technical writing details (stapled, correct grammar and spelling, flow, etc.)	<b>.25 pts. ____</b>
<b>PRESENTATION</b>	<b>(1 POINTS)</b>
Presented case background/overview in organized manner (~15-20 min)	<b>.5 pt ____</b>
Provided copy of genogram for peers	<b>.25pt ____</b>
Identified concerns and developed questions to receive feedback on?	<b>.25 pt ____</b>
<b>TOTAL earned:</b>	<b>____ out of 5 TOTAL</b>

## MFT Program Qualifying Examination (Doctoral Portfolio)

### I. Purpose of the Qualifying Examination

The portfolio provides an opportunity for students to document a variety of developmental activities relevant to the broad range of skills and experiences encompassed within their doctoral training. The portfolio requirements are designed to reflect students' competencies and accomplishments as they matriculate through the course of their training and consequently provides a record of their emergence as scholars. The portfolio is created throughout the duration of the student's doctoral studies. Progress is evaluated annually by the student's advisory committee and serves as a means to determine the progress of the student in fulfilling the requirements for their degree and in the pursuit of their post-graduate goals. According to the University Catalogue,

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

### II. Role of Faculty

The full-time members of the MFT Faculty in residence that semester will serve as the qualifying examination committee for MFT students. The examination is to represent the student's own work and is to be done independently. It is assumed that the student has received faculty feedback on her/his work during coursework and supervision. Students should work closely with their faculty advisor to complete the portfolio. The student's advisor may provide editorial feedback on the elements of the portfolio. To make sure that all students receive the same information, all questions about quals should be addressed to the MFT Program Director. The Program Director will also have an information meeting on the doctoral portfolio during the Spring semester and as needed based on doctoral students projected completion dates.

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

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

### III. Timing of the Qualifying Examination

Students must submit the doctoral portfolio for review as the qualifying exam prior to admittance to doctoral candidacy. Typically students will submit the completed portfolio for evaluation by the committee between the end of the second Spring semester of classes and the beginning of classes during the third fall semester of enrollment. Students must have completed their clinical hours for the program, the bulk of their coursework, and the bulk of their supervision practicum before submitting the portfolio. Generally, the earliest it is feasible to take quals is the middle of the second year and the latest is the middle of the third year.

### VI. Criteria for Scoring

Once the doctoral portfolio is turned in the program, the faculty will independently score the portfolio within two weeks of submission. Faculty will score the portfolio as “passing with honors (4), passing (3), resubmit with changes (2), or fail (1). At the next scheduled faculty meeting, following the two week review period, faculty scores will be recorded and averaged. An average score of 3 or better is required to pass. A score of two or greater but less than 3 will require changes and resubmission. A score less than 2 will require the student to make significant changes to the portfolio and resubmit no sooner than six months after the original submission date. A score of less than 2 for the second submission may result in dismissal from the program.

## ELEMENTS OF THE DOCTORAL PORTFOLIO

---

### PART I: RESEARCH AND SCHOLARSHIP PROFICIENCY

---

**PROGRAM GOAL:** Students will be qualified to conduct high quality relational/systemic research.

---

#### REQUIRED COMPONENTS

**Statement of Research Philosophy** - You will develop a personal statement of research philosophy. The statement should be a minimum of 5 pages long, double spaced, and APA format. Include appropriate citations as necessary.

- A description of the area of research in which you intend to focus. This should include the broad topic of research interest and may include specific methodological specialization.
- A brief discussion of the motivation for pursuing the area of research.
- A summary of research relevant research experience. Do not include projects or publications for which you had no methodological contribution.
- Specific methodological experience.
- A discussion of how you see your program of research developing in the future.
- A justification statement describing how your program of research will be beneficial (to the field, to clients, to other researchers, etc.)

#### Required Documentation:

- Append a copy of the Statement of Research Philosophy.

**Publications** - Students will complete two peer-reviewed *manuscripts* for publication:

- One article accepted in a peer-reviewed journal by the time of portfolio submission.
- At least one additional article published, accepted for publication, or submitted for publication with positive reviews (revise and resubmit) from a peer reviewed scholarly journal.
- At least one article should incorporate a relational/systemic/clinical component. For example, the focus can be on family processes, incorporating dyadic data, or addressing clinical implications.
- At least one article is empirically-based, incorporating qualitative or quantitative methodology (the other can be data driven, theory or model focused, or a literature review).
- The student is the first author or single author for at least one publication.

**Note:** Open sourced or paid publications do not meet the publication requirement.

#### Required Documentation:

- Citations for all publications.

- Append most recent manuscripts (submitted, revised-for-resubmission, published).
- Append all correspondence with journal, including editorial feedback.
- Append evidence that the journal is peer reviewed.

**Presentations:** The student will present peer-reviewed work in a professional capacity.

*Presentation requirement can be fulfilled with one of the three following formats:*

- **Option 1** - One workshop accepted at the state/national/international level.
- **Option 2** - Two poster presentations/research discussions accepted, at least one of which should be at the state/national/international level.
- **Option 3** – Two workshop presentations accepted at the local/regional level.

**Note:** The student must be the first author or a single author for at least one of the presentations.

*Required Documentation:*

- Citations for all presentations.
- Append a copy of acceptance letters.
- Append presented copies and/or handouts.
- Append a copy of program pages.

DOCUMENT TWO OF THE FOLLOWING

**Submit for External Funding:** Student will apply for external funding. Submission for external funding can be completed in one of the following capacities:

- A fellowship/scholarship application  
<http://www.depts.ttu.edu/gradschool/fellowships/external-fellowships.php>  
**Note:** Students with university fellowships have to complete this requirement annually to maintain their fellowship.
- A grant proposal submitted by the student (this can be a local, university, state or national level grant).  
**Note:** See the following websites for information on graduate student funding opportunities (not an inclusive list):
  - Fulbright <http://us.fulbrightonline.org/>
  - US Department of Health and Human Services, Administration for Children and Families funds Head Start Graduate Student Research Grants  
<http://www.acf.hhs.gov/grants/>
  - The National Institutes of Health also provide funding and training programs for doctoral candidates <http://grants.nih.gov/training/extramural.htm>
  - The National Science Foundation features a program specifically for graduate education funding <http://www.nsf.gov/div/index.jsp?org=DGE>
- A grant proposal submitted by a faculty (this can be a local, university, state or national level grant).

**Note:** The student working with a faculty member on a grant proposal should get approval beforehand that their work for the project can count toward the portfolio requirement. The student should be an active participant by attending all planned meetings, joining discussion on conceptualization of the research proposal, and completing all tasks assigned by the faculty mentor.

Required Documentation:

- Append a copy of the materials for submission.
- Append a confirmation of submission.
- If working with a faculty, append confirmation that the work was approved for the portfolio requirement and a description of the work completed with a faculty signature to confirm.

**Additional Research Training:** Student will attend at least one research training event. Student can complete more than one training event, and can count both toward the additional Research and Scholarship Proficiency requirements. Additional research training can be in one or more of the following formats:

- Attendance to a workshop training (e.g., quantitative or qualitative statistical training, neurophysiological training) equivalent to at least a one-day workshop (or 6 hours of training).
- For example, see <http://www.statscamp.org/>

**Note:** The student can also enroll in an additional statistical or research based course for credit above her/his degree plan requirements to fulfill this requirement.

Required Documentation:

- If enrolling in a statistical workshop or training event, student should provide a copy of registration information, certificate of attendance, and description of the event including a description of the topics covered.
- If enrolling in an additional course, student should provide a copy of her/his syllabus and proof on transcript of her/his enrollment in the course.
- Attend at least 2 college or university research seminars or training experiences (e.g. grant writing workshops, scholarly speaker series, college or university research colloquia series).  
**Note:** The TLPDC, the Office of the Vice President for Research, or the Texas Tech IRB are good resources for workshops. Accepted TLPDC workshops may include those on Cayuse SP & 424 training, IRB training, Budget Basics, NSF Fastlane, Research Orientation for New Faculty (should request permission before enrolling), Protecting Human Research Participants (NIH Training - <https://phrp.nihtraining.com/users/login.php> ; CITI Training – Human Subjects Training: <https://www.citiprogram.org/> )

Required Documentation:

- Provide proof of enrollment and completion of the training.

**Manuscript Review:** Student will review at least one manuscript for a refereed journal.

Manuscript review can be completed in one of the following ways:

- Student can participate in the JMFT Apprentice Reviewer program, and review an article with a faculty mentor.
- Student can participate in reviews for a journal within our field.
- Student can complete a book review.

Required Documentation:

- Provide a copy of your completed review and letter to the editor.

**Proposal Review:** Student will serve as a peer-reviewer for a proposal. Proposal review can be completed in one of the following ways:

- Serve as a proposal reviewer for a state or national conference.
- Serve as a grant proposal reviewer for a national organization.
- For example, see <http://www.samhsa.gov/grants/review/grant-review-opportunities>

Required Documentation:

- Provide a copy of a verified email, or printed copy of the confirmation page, that confirms you completed the review.
- Provide information about the organization/event you provided reviews for.

---

## PART II: CLINICAL PROFICIENCY

---

**PROGRAM GOAL:** Students will develop an advanced understanding of clinical intervention using a relational/systemic perspective.

---

### REQUIRED COMPONENTS

**Theory of Therapy:** Students will write a theory of therapy paper describing her/his therapeutic approach and models incorporation. Elements of the Theory of Therapy Paper include:

- Clearly articulate an advanced understanding of a relational/systemic clinical model or model(s) (epistemological integration should be addressed when multiple models are applied).
- Discuss the epistemological assumptions consistency with core Systems Theory assumptions.
- Discuss the intersection of the epistemological assumptions with contextual factors (ethnicity, gender, sexual orientation, SES, etc.)
- Provide a case study of the application of the model.  
**Note:** Elements of the Theory of Therapy paper will be developed during assignments for MFT 6395 Clinical Practicum..

### Required Documentation:

- Append a copy of the Theory of Therapy paper.

**Clinical Observation:** Student will have a formal observation, should be live, and assessment of a relational case completed by two separate MFT faculty.

**Note:** This requirement should be completed in conjunction with Practicum.

### Required Documentation:

- Include copies of the observation assessments that indicates clinical competency (see attached observation forms).

### DOCUMENT TWO OF THE FOLLOWING

**National Licensing Exam:** Students will take and obtain a passing score for the national LMFT licensing exam.

### Required Documentation:

- Provide documentation of the passing score for the LMFT exam.
- Provide a copy of your state license (optional).

**Specialized Clinical Training/Experience:** Students will document a training/experience in a specialized area or particular model/application through one of the following:

- Through a specialty track at a conference attendance, through attendance to a specialized conference, through certification trainings (e.g., EFT certification, EMDR training, Play Therapy Training, Gottman training).
- Through an additional elective that is clinically based.
- Obtaining a specialized license or credential (e.g., LPC, LSW, LCDC).

Required Documentation:

- Provide respective documentation of specialized clinical training/experience.
- Student must document CEUs obtained or certificate earned.
- Student must provide copy of the syllabus for the additional elective taken.
- Student must document license status, and if required, must provide results of the licensing/credentialing examination.

**Outreach Presentations:** Student will provide a series of two or more presentations for a local service agency or agencies.

Required Documentation:

- Identify program for which presentations were made.
- Include list of all related presentations.
- Peer (expert) evaluation of quality of material and presentation.

**AND/OR**

- Evaluation completed by audience for whom presentations were made.

**Complex Case Summary:** Student will complete a complex case summary.

- A brief overview (2 pages max) of a couple or family you are currently seeing which involves either intimate partner violence, substance/process addictions, chronic suicidality/medication for mood disorder(s), and/or serious health conditions.
- The description will include demographic and background information, treatment plan/goals and examples of how you are applying your model in session.
- Present the overview information and the specific challenges you are experiencing (~5-10 min) to the group for them to ask questions and offer feedback on the case (5-10 min) during pre-practicum staffing on a date to be determined with supervisor.
- Include a genogram of the family system and provide a copy for the team which highlights key patterns as well as the nature of the relationships (close, distant, estranged/cut-off), health history, addiction/substance abuse patterns, household membership, deaths, divorce, etc.

**Note:** This requirement will be completed in conjunction with MFT 6395 Clinical Practicum.

Required Documentation:

- Append a copy of the completed Complex Case Summary.

---

## PART III: SUPERVISION PROFICIENCY

---

**PROGRAM GOAL:** Students will be prepared to teach/provide clinical supervision from a relational/systemic perspective.

---

### REQUIRED COMPONENTS

**Philosophy of Supervision:** Prepare a paper that details your philosophy of supervision. The paper should provide a consistent theoretical framework to guide your work as a clinical supervisor, address each of the nine elements detailed in the AAMFT Handbook (p. 51), and reference the AAMFT Core Competencies. The paper should be typed, APA format, and no more than 15 pages in length (excluding references).

- A discussion of the core theoretical concepts that guide your work (if you integrate multiple perspectives, be sure to discuss theoretical consistency). How does your philosophy of supervision relate to your theory of therapy?
- A discussion of how the core assumptions will influence your behavior as a supervisor.
- A discussion of how your philosophy of supervision addresses contextual issues (gender, culture, ethnicity, sexual orientation, SES).
- A discussion of how self of the supervisor issues may impact your work.
  - Specifically address gender, ethnicity, sexual orientation, conflict styles, problem solving style, and “hot button” issues.
- A discussion of how various methods of supervision (live, video, case consult, etc.) and constellations of treatment (e.g. individual, couple, family) fit with your philosophy.
- The eight elements detailed on p. 51 of the AAMFT Handbook

**Note:** A draft of this component will be developed as part of MFT 6396 Supervision of MFT.

### Required Documentation:

- Provide a copy of the Philosophy of Supervision paper.

**Approved Supervisor Requirements:** Student will complete a minimum of 2 full academic semesters (Fall, Spring) of the doctoral track program requirements for the approved supervisor designation.

**Note:** This requirement will be completed as part of MFT 6396 Supervision of MFT and MFT 6397 Supervision Practicum.

### Required Documentation:

- Provide documentation of fulfillment of doctoral track program requirements for the approved supervisor designation, including supervision hours documentation, sup-of-sup hours documentation.

**Supervisor Candidate Evaluation:** Student will have an evaluation completed by her/his supervision mentor.

*Note:* This requirement will be completed as part of MFT 6397 Supervision Practicum.

*Required Documentation:*

- Provide final documentation of Supervisor Candidate Evaluation with faculty endorsement (pg. 49 of The Approved Supervisor Handbook)

**Self-Appraisal of Supervision:** Student will complete a self-appraisal of supervision.

*Note:* This requirement will be completed as part of MFT 6397 Supervision Practicum.

*Required Documentation:*

- Append a copy of the Supervision Self-Evaluation from the final semester of Supervisory activity (usually summer II of the second year).

---

## PART IV: TEACHING PROFICIENCY

---

**PROGRAM GOAL:** Students will be prepared to teach/provide clinical supervision from a relational/systemic perspective.

---

### REQUIRED COMPONENTS

**Teaching Philosophy Statement:** Student will complete a Teaching Philosophy Statement.

**Note:** A draft of this requirement will be developed as part of MFT 6396 Supervision of MFT.

- Your ideas about how adults learn
- How you would handle potential unintended interpersonal process issues and how you would handle them (like someone gets defensive or says they don't like the topic, or they've already had this topic)
- Your faculty learning goals for teaching this course
- How you will know you have been successful both on your goals and in making a cohesive course in which students meet the course's student learning goals
- You are allowed to use TTU resources from the TLPDC center (e.g., [www.tlpd.ttu.edu/teach/TLTC%20Teaching%20Resources/EffectiveSyllabus.asp](http://www.tlpd.ttu.edu/teach/TLTC%20Teaching%20Resources/EffectiveSyllabus.asp)) for this assignment, but do not plagiarize from another syllabus.

### Required Documentation:

- Append a copy of the Teaching Philosophy Statement.

### DOCUMENT TWO OF THE FOLLOWING

**Teach One Course:** Student will take responsibility for one course section at Texas Tech University.

### Required Documentation:

- Append a copy of the course syllabus.
- Student evaluations (numerical) and all written comments.
- One faculty evaluation of effectiveness of teaching.

**Teach a Second Course:** Student will take responsibility for a second course section, with a different course topic from the first course, at Texas Tech University.

### Required Documentation:

- Append a copy of the course syllabus.
- Student evaluations (numerical) and all written comments.

**Volunteer as a TA:** Student will volunteer as a TA for one course section with a faculty member.

Required Documentation:

- Append a copy of the course syllabus.
- Description of TA responsibilities.
- Faculty description of TA participation.

**Invited Outreach Presentations:** Student will participate in **two** invited outreach presentations. Examples include the Great Start relationship education training.

Required Documentation:

- Append invitation and information about the meeting.
- Append materials used for presentation.

**Guest Lecture:** Student will guest lecture in **two** classes for at least an hour each. Student will have full responsibility for teaching the unit for that class period.

Required Documentation:

- One faculty evaluation of teaching (using the modified teaching evaluation form).
- Provide materials used for teaching.

**TEACH Program:** Student will apply for and accepted into the TEACH program (see [http://www.depts.ttu.edu/tlpdc/Teach\\_Program/index.php](http://www.depts.ttu.edu/tlpdc/Teach_Program/index.php)).

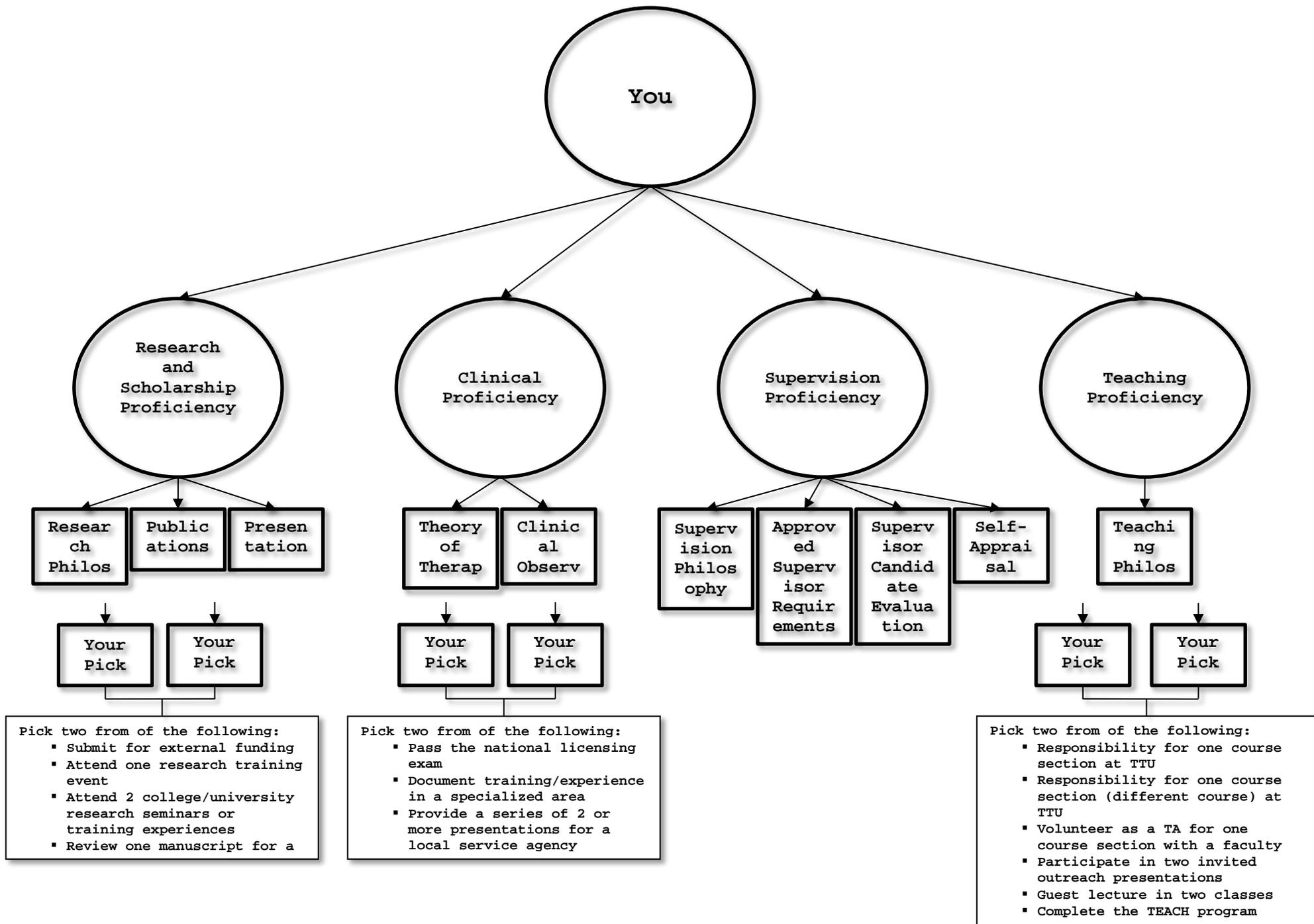
Required Documentation:

- Provide copy of acceptance letter into the program.

**TLPDC Training:** Student will attend 2 TLPDC training events focused on teaching (e.g., Assessment for Graduate Students, Creating Online course content, What the Best College Teachers Do, Fostering Critical Thinking, Designing an Assessment Rubric, etc.).

Required Documentation:

- Provide documentation of attendance to the event.
- Provide a copy of the event description.



**DOCTORAL PORTFOLIO RUBRICS/FORMS**

## Statement of Research Philosophy

Spelling, Grammar, and Organization - 10 pts	
pts.	Comments:
APA Format – 10 pts.	
pts.	Comments:
Use of Available Page Limit – 5 pts.	
pts.	Comments:
Describe the broad topic area of research (specific subject and/or methodology) you intend to focus on – 5 pts.	
pts.	Comments:
Summarize the current state of the literature – 5 pts.	
pts.	Comments:
Summarize gaps in the current literature – 5 pts.	
pts.	Comments:
Describe your motivation for pursuing the area of research – 10 pts.	
pts.	Comments:
Describe how you envision your program of research developing in the future. This should take the form of logically connected steps that build on previous steps – 10 pts.	
pts.	Comments:
Identify specific populations that will benefit (clients, clinicians, researchers, etc.) – 5 pts.	
pts.	Comments:
Provide specific justification for how your program of research will benefit the identified populations – 5pts.	
pts.	Comments:
Provide specific justification for how your research is connected to or benefits the field of MFT – 5 pts.	
pts.	Comments:
Provide a summary of relevant research experience (can be in CV format) – 5 pts.	
pts.	Comments:
Provide a summary of methodological experience/expertise - 5	
pts.	Comments:

STUDENT: \_\_\_\_\_

Advanced Epistemological Critique/Theory of Therapy Paper	Score
<p>Model(s) Utilized (4 points)</p> <ul style="list-style-type: none"><li>• Student was able to clearly articulate their primary model (or models).</li><li>• Student addressed systemic nature of their model(s).</li><li>• Student identified limitations or challenges of working from their model(s); especially when working with specific constellations, presenting problems, and/or when working with marginalized clients.</li><li>• Student identifies ethical and contextual considerations specific to the model assumptions.</li><li>• Student described how models (if more than one model is used) are rooted in similar and/or different assumptions and how they navigate across models; specifically when and why they might utilize one model over the other.</li></ul>	
<p>Case Application (4 points)</p> <ul style="list-style-type: none"><li>• Student provided a description of a relational case; including contextual factors (gender, ethnicity, SES, etc.).</li><li>• Student applied key concepts, terms, assumptions from the model(s) while using case specific examples.</li><li>• Student developed a model specific treatment plan.</li><li>• Student created at least a 2-generation genogram of a relational case.</li></ul>	
<p>Format/Organization/Length (2 pts)</p> <ul style="list-style-type: none"><li>• Paper is well organized</li><li>• Paper is free of spelling and grammar mistakes</li><li>• Student followed APA format</li><li>• Student utilized primary sources (not overview/introductory texts)</li><li>• Paper was at least 15 pages in length</li></ul>	
<p><b><i>Additional comments are noted within the document</i></b></p>	<p><b>Total Score: out of 10</b></p>

## Clinical Observation Form PhD. in MFT

Name: \_\_\_\_\_ Date of Observation: \_\_\_\_\_

Observer: \_\_\_\_\_ Location of Observation: \_\_\_\_\_

Session Number: \_\_\_\_\_ Modality: \_\_\_\_\_

Number, Relationships, & Ages of Clients in Session: \_\_\_\_\_

---

Please assess ***the student's observed abilities*** by responding to the following items using the following six-point scale (commensurate with expectations for students at this respective stage of development):

- 1 - **excellent**
- 2 - **very good**
- 3 - **good**
- 4 - **adequate**
- 5 - **poor**
- 6 - **very poor**

### **Case Management**

- \_\_\_\_\_ Consent Forms completed in accordance with clinic policy
- \_\_\_\_\_ ROI completed in accordance with clinic policy
- \_\_\_\_\_ Case Note completed in accordance with clinic policy
- \_\_\_\_\_ Case Note content reflects content and process observed
- \_\_\_\_\_ Treatment Plan completed in accordance with clinic policy
- \_\_\_\_\_ The problems of focus and related intervention agenda are defined in treatment plan
- \_\_\_\_\_ Treatment Plan reflects areas of emphasis in observed session
- \_\_\_\_\_ Fees and payment history are documented in accordance with clinic policy

### **Clinical Engagement**

- \_\_\_\_\_ Is punctual in beginning session
- \_\_\_\_\_ Is punctual in concluding session
- \_\_\_\_\_ Empathic ability
- \_\_\_\_\_ Listening ability
- \_\_\_\_\_ Ability to develop rapport
- \_\_\_\_\_ Ability to join
- \_\_\_\_\_ Balances Attention among all attendees

### **Assessment, Case Conceptualization & Clinical Theory**

- \_\_\_\_\_ Utilizes client report to define clinical focus
- \_\_\_\_\_ Utilizes personal observation of both individual and interactive material to define clinical focus

- \_\_\_ Utilizes assessment and other written case data
- \_\_\_ Multi-partiality
- \_\_\_ Diagnostic Interviewing skills
- \_\_\_ Assesses for substance abuse / dependence
- \_\_\_ Assesses for process addiction
- \_\_\_ Assesses for client welfare & safety
- \_\_\_ Assesses for interpersonal violence & aggression
- \_\_\_ Assesses for minor and/or challenged adult exploitation, neglect & abuse
- \_\_\_ Case Formulations consistently reflect a systemic clinical model
- \_\_\_ Case Formulations reflect an advanced application of clinical theory

### **Clinical Intervention**

- \_\_\_ Ability to provide feedback and suggestions
- \_\_\_ Ability to promote client growth/change
- \_\_\_ Interventions are consistent with treatment plan content
- \_\_\_ Interventions reflect a systemic orientation to clinical problems
- \_\_\_ Interventions are consistent with espoused clinical model
- \_\_\_ Interventions are relevant to identified client problems
- \_\_\_ Intervenes (if indicated) to promote client safety
- \_\_\_ Interventions reflect an advanced command of systemic clinical theory

### **Awareness and Integration of Addiction / Recovery Science**

- \_\_\_ Observed conduct in session is consistent with current literature and findings relevant to the study of addiction and recovery

### **Awareness and Integration of Relevant Clinical & Empirical Literature**

- \_\_\_ Observed conduct in session is consistent with current literature and findings relevant to the problems of concern
- \_\_\_ Observed conduct in supervision reflects interest in relevant literature and findings
- \_\_\_ Clinical conduct and case conceptualization are informed by the available clinical and empirical literatures
- \_\_\_ Clinical experiences are influential in student's research agenda
- \_\_\_ Student research agenda is influential on student's clinical experiences and development

### **Openness to Supervision, Self of Therapist, & Collegial Relationships**

- \_\_\_ Clinical Identity is clearly within the field of Marriage and Family Therapy
- \_\_\_ Receptivity to Feedback
- \_\_\_ Integration of Feedback into clinical activity
- \_\_\_ Recognition of personal limitations
- \_\_\_ Self confidence
- \_\_\_ Investment in Collegial Atmosphere
- \_\_\_ Awareness of relevant personal issues
- \_\_\_ Management of Personal Emotions
- \_\_\_ Management of Client Conflict

- \_\_\_ Management of Clinical Boundaries
- \_\_\_ Openness to Refer
- \_\_\_ Openness to consultation & collaboration

**Ethics, Contextual Factors, and Legal Issues in Clinical Practice**

- \_\_\_ Professional Boundaries
- \_\_\_ Sensitivity to individual differences
- \_\_\_ Sensitivity to gender issues
- \_\_\_ Sensitivity to racial issues
- \_\_\_ Sensitivity to ethnic issues
- \_\_\_ Sensitivity to personal issues
- \_\_\_ Comprehension of relevant ethical standards
- \_\_\_ Comprehension of relevant legal issues

### Grading Rubric for Complex Case Assignment:

<b>PAPER</b>	<b>(8 POINTS)</b>
Inclusion of relevant case information <u>and</u> genogram (age, roles, relationship length, ethnicity, abuse history, addiction history, intergenerational patterns, and other important details)	<b>2 pts. ____</b>
Brief description of presenting problem(s)	<b>.5 pts. ____</b>
Case conceptualization (from your model of therapy), initial hypotheses regarding systemic dynamics, etc. <ul style="list-style-type: none"> <li>• Including use of assumptions, terms/constructs, and interventions applied to case</li> </ul>	<b>3 pts. ____</b>
Model specific treatment plan/goals/strategy for achieving therapeutic goals <ul style="list-style-type: none"> <li>• <b>Use AMD template for treatment plan</b></li> <li>• <b>The Child/Adolescent/Family/or Couple Treatment Planner books are recommended</b></li> </ul>	<b>2 pts. ____</b>
Technical writing details (stapled, correct grammar and spelling, flow, etc.); 2 pages in length	<b>.5 pts. ____</b>
<b>PRESENTATION</b>	<b>(2 POINTS)</b>
Presented case background/overview in organized manner (~15-20 min)	<b>1 pt ____</b>
Provided copy of genogram for peers	<b>.5pt ____</b>
Identified challenges/limitations of model regarding this case, as well as concerns and questions to receive feedback about?	<b>.5 pt ____</b>
<b>TOTAL earned:</b>	<b>_____ out of 10 TOTAL</b>

### Philosophy of Supervision Rubric

Criteria	Beginning(C)	Better (B)	Excellent (A)
Discussion of core theoretical constructs	Identify and define the core theoretical constructs.	Identify and define core theoretical constructs. Identify core systems theory or post modern epistemological assumptions.	Identify and define core theoretical constructs as part of a nuanced discussion of the intersection of theoretical constructs with core systems/post-modern theory. Integrates relevant literature and discusses area of theoretical agreement and dissonance.
Discussion of how core assumptions influence your behavior.	Discuss specific supervisory behavior.	Articulate how core assumptions are understood to lead to specific behavioral actions in supervision.	Clearly articulate how core assumptions are understood to lead to specific behavioral actions in supervision. Integrate relevant literature.
Discussion of how philosophy addresses contextual issues.	Discuss an awareness of contextual issues.	Links awareness of contextual issues to the specific epistemological assumptions of the philosophy of supervision.	A nuanced discussion of the intersection between epistemological assumptions and a variety of contextual issues. Integrates relevant literature on both supervision and contextual factors. Recognizes both strengths and weaknesses of your philosophy.
Influence of self of supervisor issues.	Demonstrate an awareness of self of supervisor issues.	Links awareness of self of supervisor issues to core assumptions of the philosophy of supervision.	A nuanced discussion of specific self of supervisor issues (contextual factors) and the intersection with the epistemological assumptions. Integrates relevant supervision and contextual factors literature.
Discussion of methods of supervision.	Articulates preferred methods of supervision and situations one is preferred over another.	Discussion of the intersection between methods of supervision and the core assumptions of the philosophy of supervision.	A nuanced discussion of the intersection between methods of supervision and the epistemological assumptions grounding the philosophy of supervision. Integrates relevant literature.
Writing	Consistent use of APA format.	Consistent use of APA format. Minimal grammar, spelling, and punctuation errors. Writing is organized by idea, concise, and makes good use of the available page limit.	Consistent use of APA format. Excellent grammar, spelling, and punctuation. Writing is organized by idea, concise, and makes full use of the available page limit.

Aspect	Beginning (C)	Getting Better (b)	Wonderful (A)	Creative Additions
<b>PHIL OF TEACHING</b>				
<b>How adults learn</b>	not linked to scholarship of adult learning	based on a single model but clear	based on more than one scholar/model and personalized	
<b>Goals of teaching</b>	vague and brief	clear and articulates what one gets from teaching	plus: talks about the interpersonal nature of good teaching	
<b>Goals of Learning</b>	not consumer focused	Include at least three types of adult learning	plus: personalized discipline and types of teaching one does	
<b>Methods of teaching</b>	Does not include experiential and are not student focused (teacher focused)	Includes three types of teaching and two must be experiential	plus: talks about why one thinks important to do more than one and the interactions among the methods of teaching	
<b>Methods of Assessment</b>	very basic description (like a list)	includes informal and formal	plus: clearly tied to learning experience and are student focused (extends the learning)	
<b>Technology</b>	does not include	includes but not tied to above	tied to above topics in some way	

## **Instructional Observation Feedback**

### **I. Instructor/Presenter**

**: Topic:**

**Date:**

**Time:**

**Consultant:**

*Keep in mind that if a prompt in one of the lists below is labeled “not observed,” it does not mean that you did something poorly or missed a particular teaching element. It simply indicates that during this particular observation, the trait was not observed. It may or may not be evident on another day and is included for your self--*

### **ORGANIZATION**

- Previews lecture/discussion content
- Clearly states the goal or objective for the period
- Reviews background material to prepare students for the content to be covered
- Provides internal summaries and transitions
- Does not digress often from the main topic
- Summarizes and distills main points at the end of class
- Appears well-prepared for class
- Organizes time efficiently

### **PRESENTATION**

- Incorporates various instructional supports like slides, films, diagrams, etc.
- Uses instructional support effectively
- Selects teaching methods appropriate for the content
- Uses a variety of spaces in the classroom from which to present material (i.e., does not “hide” behind the podium)
- Blackboard writing is large and legible
- Speech fillers, (for example, “OK, ahm”) are not distracting
- Speech is neither too formal not too casual
- Speaks audibly and clearly
- Talks to the students, not the board or windows
- Varies the pace to keep students alert
- Establishes and maintains eye contact with students
- Uses gestures to enhance meaning and not to release nervous tension (repetitive gestures tend to do the latter)
- Communicates a sense of enthusiasm and excitement toward the content
- Use of humor is positive and appropriate
- Presentation style facilitates note-taking

## **RAPPORT**

- Knows and uses student names
- Solicits student feedback
- Requires student thought and participation
- Praises students for contributions that deserve commendation
- Responds constructively to student opinions
- Responds to students as individuals
- Treats class members equitably
- Listens carefully to student comments and questions
- Recognizes when students do not understand
- Does not deprecate student ignorance or misunderstanding
- Creates an inclusive learning environment
- Encourages mutual respect among students
- Demonstrates credibility and control
- Is able to admit error and/or insufficient knowledge
- Responds to distractions effectively yet constructively
- Speaks about course content with confidence and authority
- Uses authority in classroom to create an environment conducive to learning

## **INTERACTION**

- Encourages student questions, involvement, and debate
- Answers student questions clearly and directly
- Uses rhetorical questions to gain student attention
- Gives students enough time to respond to questions
- Refrains from answering own questions
- Responds to wrong answers constructively
- Allows ample time for student questions
- Encourages students to respond to each other's questions
- Encourages students to answer difficult questions by providing cues and encouragement
- Allows relevant student discussion to proceed uninterrupted
- Presents challenging questions to stimulate discussion
- Respects diverse points of view

## **CONTENT**

- Includes illustrations
- Integrates text material into class presentations
- Selects examples relevant to student experiences and course content
- Makes course content relevant with references to "real world" applications
- Presents views other than own when appropriate
- Seeks to apply theory to problem-solving
- Explicitly states relationships among various topics and facts/theory
- Explains difficult terms, concepts, or problems in more than one way
- Presents background of ideas and concepts
- Presents pertinent facts and concepts from related fields
- Presents up-to-date developments in the field

**STRENGTHS**

**SUGGESTIONS**

**SECTION VII**  
**PRACTICUM**

## Marriage and Family Therapy Program Practicum Hours

### *Hours Policy – Summary*

- The TTU MFT Program requires a minimum of 500 hours of client contact with a minimum of 200 client contact hours occurring during the doctoral program. This total must be completed by graduation. However:
  - Students who are coming from accredited master's programs will be able to transfer in up to 500 clinical hours from their master's (with the corresponding 100 supervision hours).
  - Students coming from non-accredited or other clinical master's programs will be able to transfer in some of their clinical hours (see the full policies for more detail).
  - The remaining hours must be achieved during the doctoral work under the guidance of the clinical faculty in doctoral practicum (at least 250 hours).
- For hours to count under the internship umbrella, requirements for the internship (e.g., contract) must be in place.
- Generally, when students choose to work at clinical positions outside of the FTC and their internship, these hours will count toward that student's total licensure hours, but will not count toward their 200 total in their degree plan. Our first priority is the clinical experience the students have *in our clinic and in their internship*.
- Doctoral students coming with an MFT master's degree will be expected to enroll in practicum for at least 4 semesters (Fall, Spring, Summer I, and Summer II). Students will switch into a supervisory role during their second fall semester. They may continue seeing clients (or teaming) during that time if needed for hours.

**Texas Tech University  
Marriage and Family Therapy Program  
Clinical Experiences**

**I. Professional Standards and Professional Behavior**

MFT faculty and students enrolled in the MFT Program must adhere to AAMFT standards of ethical professional behavior in their therapy training, teaching, and research. A complete copy of the most current edition of the AAMFT Code of Ethical Principles for Marriage and Family Therapists is available in the Texas Tech Family Therapy Clinic and on-line.

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

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

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

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

**II. Client Contact Hour Requirements**

**Prior to graduation from the MFT Program, each student is required to complete at least 500 hours of direct client contact (face-to-face) under the supervision of an AAMFT Approved Supervisor (or equivalent) and at least 200 hours of supervised direct client contact during the doctoral program (student's transferring in the maximum 500 hours from their master's program will therefore complete a total of 700 hours). At least 40% of the clinical hours must be with couples, families, or other relational systems.**

- "Direct contact" means face-to-face contact with clients.

- Two therapists working together in the room with the clients is considered "direct contact" for both therapists.
- Psychoeducation may be counted as direct client contact.
- Observation of another therapist's work, although valuable, does not constitute "direct contact" unless during a team or practicum.
- Up to 20% of clinical hours may consist of alternative therapeutic contact that is systemic and interactional. **Prior** approval by the Director of Clinical Training is required to include alternative therapeutic contact and psychoeducation hours in the hours requirement. (See "Alternative Client Contact Hours" Section)
- 40% of the hours of client contact must be with couples, families, or other relational systems.

The hour requirement for the TTU MFT program is met as follows:

## **A. PRACTICUM**

Because the MFT program includes both master's and doctoral-level students, it is important to determine the requirements for each student. There are 4 categories: (1) master's students (2) students who enter the Ph.D. program with a master's degree in an area that does not include clinical experience, (3) students who enter the Ph.D. with a master's degree in an area that does include clinical experience, but is not accredited by Commission on Accreditation of Marriage and Family Therapy Education (COAMFTE), and (4) students who enter the doctoral program with a master's from a program accredited by the COAMFTE.

### **1. Master's MFT students.**

- a. Master's degree students will enroll in a minimum of 15 credits of MFT 6395 Practicum.
- b. Master's degree students are expected to maintain a clinical caseload in the Family Therapy Clinic During the Spring, Summer I, and Summer II semesters of the first academic year of enrollment and during the Fall semester of the second academic year of enrollment.
- c. Master's students are expected to transition to an externship placement during the Fall semester of the second year of enrollment.
- d. Master's degree students are expected to meet the requirements of the Foundational Practice Component of the Version 12 Accreditation Standards.
  - i. Complete 500 direct clinical contact hours under AAMFT approved supervision.
  - ii. Up to 100 of the direct clinical contact hours may be "alternative" hours.
  - iii. 40% of the 500 direct clinical contact hours must be with couples, families, or other relational systems.

- iv. Students must participate in a minimum of 100 hours of qualifying supervision.

**2. Ph.D. MFT students with a master's degree in a nonclinical area (e.g., sociology, family studies).**

- a. Although these students may be able to transfer in classes (up to 9 credits worth) from their nonclinical master's degree, they will then be required to complete the Foundational Curriculum in MFT (equivalent of an MFT master's degree from TTU).
  - i. Requirements
    - 1. Complete 500 direct clinical contact hours under AAMFT approved supervision.
    - 2. Complete at least 200 of the direct clinical contact hours in the TTU Family Therapy Clinic.
    - 3. Up to 100 of the direct clinical contact hours may be "alternative" hours.
    - 4. 40% of the 500 direct clinical contact hours must be with couples, families, or other relational systems.
    - 5. Students must participate in a minimum of 100 hours of qualifying supervision.

**3. Ph.D. MFT students with a master's degree in a related clinical area (e.g., clinical or counseling psychology, social work) or from a MFT master's program not accredited by COAMFTE.**

- a. These doctoral students may transfer in up to 500 of their clinical hours if a Formal Waiver is granted by the Clinic Director.
- b. *Formal Waiver:* Students who have clinical experience and have received a Master's degree from a program that is NOT accredited by the COAMFTE may apply to have a portion (up to 500) of their clinical experience hours transferred if these hours were accumulated under the direct supervision of an AAMFT Approved Supervisor or a supervisor who has been deemed as being equivalent to a AAMFT Approved Supervisor by the Director of Clinical Training and 40% of the contact hours occurred with couples, families, or other relational systems. An additional 200 direct clinical contact hours must be accrued during the doctoral program which meet the same requirements for proportion of relational hours, proportion of alternate hours, and AAMFT supervision.
- c. Family Therapy Clinic

- i. All direct contact hours earned in the Clinic or accepted by the Director of Clinical Training from elsewhere are counted toward the required 500 hours for the Ph.D.
  - d. Students who have a full 500-hour waiver
    - i. Will provide services in the Family Therapy Clinic on a continuous basis for a minimum of four semesters. (Fall, Spring, Summer I, Summer II).
    - ii. This experience will be completed in the Texas Tech University Family Therapy Clinic under MFT faculty supervision. At least 40% of these hours must be relational. Students must be enrolled in MFT 6395 while providing direct client services in the Family Therapy Clinic.
  - e. Students with less than a full 500-hour waiver
    - i. Will provide services in the Family Therapy Clinic on a continuous basis for a minimum of four semesters.
    - ii. A minimum number of direct client contact hours required in practicum will be set by the Director of Clinical Training (i.e., 500 hours – the number of hours accepted). At least 40% of these hours must be relational. Students must be enrolled in MFT 6395 while providing direct client services in the Family Therapy Clinic.
  - f. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the Ph.D. program enrollments (limit = 100 hrs.). See the section on alternative hours for a definition of activities that are considered alternative hours. The Clinic Director must approve the source of alternative hours in advance.

**4. Students with a Master's from a COAMFTE-Accredited Program.**

- a. These students may transfer in up to 500 of their clinical hours (including 100 hours of supervision) if a Formal Waiver is granted by the Clinic Director.
- b. The "Transfer of Client Hours" form must be submitted to the Director of Clinical Training prior to the student's Plan of Study meeting with the Program Director. A copy of this form may be found in the MFT Program Training Manual for Graduate Students, Section V: Plan of Study.
- c. Family Therapy Clinic
  - i. Students in this category will provide services in the Family Therapy Clinic on a continuous basis for a minimum of four semesters.
  - ii. A minimum of 200 hours of direct client contact must be completed during the doctoral program in the Texas Tech University Family Therapy Clinic under MFT faculty supervision. At least 40% of these hours must be relational. Students must be enrolled in MFT 6395 while providing direct

client services in the Family Therapy Clinic. Students may choose to earn more of their hours in the Family Therapy Clinic.

- d. Alternative Therapy Hours—the number of alternative hours is limited to 1/5th of the direct clinical contact hours credited to the student over the period of the Ph.D. program enrollments (limit = 100 hrs.). See the section on alternative hours for a definition of activities that are considered alternative. The Director of Clinical Training must approve the source of alternative hours in advance.

### III. Requirements for AAMFT Clinical Membership and Licensure in Texas

#### **Student membership**

Student members are those that are enrolled in a graduate marriage or family therapy program, or an equivalent graduate mental health program, which can reasonably be expected to lead to qualifications as a Clinical Fellow or Member of AAMFT. Student member may remain in this category for a maximum term of five (5) years or until satisfactory completion and receipt of a qualifying graduate degree, whichever shall come first. Students who are eligible for a higher category of membership are ineligible for student membership in AAMFT.

#### **Pre-Clinical Fellow Membership**

An individual who has completed a master's or doctoral degree in marriage and family therapy from a regionally accredited educational institution, or an equivalent course of study, and is completing the post degree supervised clinical hours toward the highest level of MFT licensure in a US state.

#### **Clinical Fellow Membership**

Clinical Fellow membership is the credentialed level of membership in AAMFT. Clinical Fellows have met rigorous standards of training in marriage and family therapy and are recognized worldwide for these standards.

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

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

- Students completing a master's degree in MFT with (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist are eligible to apply for licensure as a Licensed Marriage and Family Therapist-Associate license.
- Students who enter the MFT Ph.D. program with a master's in a nonclinical area (e.g., sociology, family studies) must complete (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license.
- Students who enter the MFT Ph.D. program with a master's in a related clinical area (e.g., clinical or counseling psychology, social work) are still required to meet the following requirements (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license. It is the student's responsibility to present sufficient evidence to the Board for acceptance of clinical experiences and master's-level coursework.
- Students who enter the MFT Ph.D. program with a master's from an accredited (COAMFTE) MFT program must present evidence that they meet the following requirements (a) one (1) year of supervised clinical experience and (b) all the post-baccalaureate courses required by the State Board of Examiners of Marriage and Family Therapist to be eligible to apply for licensure as an Licensed Marriage and Family Therapist-Associate license. Students meeting these criteria are encouraged to apply immediately for Associate licensure.

### **III. Supervision Hour Requirements (Practicum and Internship)**

#### **A. PRACTICUM**

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

During the period of the practicum, the student will be expected to receive supervision at least once a week. Students must receive supervision hours equivalent to 20% of their total client contact hours. Half of the supervision hours must utilize observable data (live, video, or audio supervision). Supervision may be individual or group.

Under the current rules of the COAMFTE, individual supervision is defined as meeting with the supervisor with no more than two supervisees. Group supervision is defined as meeting with the supervisor with no more than 8 total student supervisees. Under normal circumstances, every student in the Texas Tech MFT Program will receive more hours of supervision than the COAMFTE minimum requirement.

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

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

Hours of supervision of graduate students by other graduate students in the MFT program may be counted toward the required hours of supervision only if the other graduate student is an AAMFT Approved Supervisor in Training and at a higher level of clinical experience. The student being supervised must continue to meet with an approved supervisor or equivalent at least every other week to ensure that the hours of direct client contact are available to meet MFT Program, COAMFTE, LMFT, and AAMFT Clinical Membership requirements.

#### **IV. Documentation of Hours (Practicum and Internship)**

To meet the direct client contact requirements in practicum over a one year period, the student therapist will need to conduct 6-8 hours of therapy sessions each week under appropriate weekly or biweekly supervision. Each MFT doctoral student will be assigned one evening each week for clinical practicum and additional clinical slots will be determined through the TTU Family Therapy Clinic Director. Good clinical practice dictates setting aside 2-3 large blocks of time for clinical work, rather than trying to fit clients into odd free hours scattered through the week. In reality, more client contact hours must be scheduled to allow for vacation periods, slow times, clients who fail to attend appointments, illness, etc. Similarly, supervision sessions should be scheduled to allow for vacation times, conferences, illnesses, etc.

During the course of each semester, FT Clinic records will be used to update the student's permanent record of hours of therapy and hours of supervision, using the

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

## V. Other Information

1. Evaluation of Practicum Performance. Prior to the end of each semester enrolled in clinical practicum or supervision practicum, both the clinical supervisor or supervisor of supervision and the student will use the Qualtrics system to complete the Practicum or Supervision Evaluation and the Practicum or Supervision Self Evaluation. One week prior to the end of the semester, the student therapist/supervisor and the practicum supervisor/supervision mentor will meet to review practicum performance. The student will complete a self-evaluation. However, these comments do not constitute an appeal of the grade for practicum (See Section on Grievance and Dismissal Policies and Procedures, for grade appeal procedures). The Practicum/Supervision Evaluation and the Practicum/Supervision Self Evaluation will become part of the student's MFT program record. In addition, each student will be requested to evaluate the practicum experience in writing. These evaluations will be collected by the secretary for the MFT Program and typed to provide anonymity for the student. A copy of the anonymous statements will be circulated to all MFT faculty, including the practicum supervisor.
2. Completion of Clinic Responsibilities. In addition to completing the required hours in practica and receiving permission from the faculty, students who wish to be released from practicum and begin internship must provide written documentation that they have taken the national-level Marriage and Family Therapy Licensure Examination and received a score that would be considered passing by the Texas Board of Examiners of Marriage and Family Therapists or have permission from the Board to take the next examination available.
3. State of Texas Marriage and Family Therapy Licensure Requirements  
In states/provinces, such as Texas, where AAMFT has approved the licensure/certification process, a state/provincial license as a Marriage and Family Therapist is required for clinical membership. Currently, the State of Texas requires 3000 postgraduate hours (a minimum of 1500 hours of direct clinical services of which a minimum of 750 hours must be direct clinical services to couples and/or

families) and 200 hours of supervision (100 hours of which must be individual supervision).

**Statement on client load. Over the period of time spent in the Family Therapy Clinic, client loads are expected to increase to between 6 and 8 hours a week. However, client loads are determined by the student's supervisor in consultation with the Clinic Director, and may be more than 6 or either more or less than 8 a week. Further, the mix of individual, couple, family, and group cases is also a matter determined by the student's supervisor and the Clinic Director. Because the Family Therapy Clinic operates as a public facility, there may be times when loads increase over the expected level and the mix of cases desired by the student may not be feasible.**

**SECTION VIII**

**ALTERNATIVE CLIENT CONTACT HOURS**

# Alternative Client Contact Hours

The MFT Program allows for 20% of the required clinical practicum client contact hours to be comprised of alternative experiences that may not be strictly clinical in nature. The alternative hours **MUST** be systemic and interactive in nature, and **PRIOR** approval is needed to claim such hours.

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

## 1. **Interactive Team Member**

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

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

- a. **If you observe a live session during practicum and participate by providing input to the therapist.** Any participation that would be considered as “Live Group Supervision” during practicum can also be counted as an Alternative Team activity.
- b. **If you observe a live session of a student therapist and you participate by providing input to the therapist *PROVIDED YOU CAN HONESTLY DOCUMENT THE SESSION AND HAVE YOUR ALTERNATIVE HOURS WCSR VERIFIED VIA SIGNATURE OF AN MFT FACULTY.***
- c. **If you serve as a co-therapist to another student therapist during a live session *ONCE YOU HAVE COMPLETED ALL OF YOUR PRACTICUM HOURS REQUIREMENTS.***
- d. **If you accurately report your participation on the Alternative Hours WCSR form, following the same 30-day rule that governs the standard WCSR form.**
- e. **If you do not exceed the total cumulative limit for ALL alternative activities specified under Section VII-Practicum.**

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

## 2. **Providing Therapeutic Psycho-Education**

Providing **therapeutic psycho-education** (e.g., a depression support group), as opposed to therapy, will count as long as the experience is face-to-face, direct contact. This does NOT include a psycho-educational presentation to a group of therapists for the purpose of professional development (e.g., local, state or national conference presentations), nor does this include any classes you may have taught or will teach in the future.

Prior approval by the MFT faculty of ANY proposed Alternative Hour activity is required in order for the experience to be considered acceptable as an Alternative Hour Activity. Approval must be obtained for each different activity and/or site via the new "Alternative Hour Activity Proposal" form which MUST be presented to the faculty BEFORE any activity will be counted.

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

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

## Alternative Hours Activity Proposal

Up to 20% of your hours of clinical practicum may be alternative therapeutic contact hours. These hours must be approved by your faculty supervisor prior to the experience. **These alternative hours must be systemic, interactional, and add diversity to your practicum experience.**

Your name: \_\_\_\_\_

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

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Proposed hours and dates of service: \_\_\_\_\_

Using 2-3 sentences, respond to the following:

1. How will this work be systemic and interactional?
  
  
  
  
  
  
  
  
  
  
2. How will this client contact add diversity to your practicum experience?
  
  
  
  
  
  
  
  
  
  
3. How will the client(s) know that a therapeutic contract exists in this setting?

$\pi$  Approved

$\pi$  Not Approved

$\pi$  Approved pending

\_\_\_\_\_

Signature of Faculty Supervisor

\_\_\_\_\_

Date

\*\*\*\*\*

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

Number of alternative hours approved: \_\_\_\_\_

\_\_\_\_\_

Signature of Faculty Supervisor

\_\_\_\_\_

Date

**SECTION IX**

**MASTER'S EXTERNSHIP**

# INTERNSHIP EXTERNAL PLACEMENT EXTERNAL PLACEMENT INFORMATION

## I. DEFINITION OF AN INTERNSHIP EXTERNAL PLACEMENT EXTERNAL PLACEMENT

*“The internship external placement is to provide ~~doctoral~~ master’s degree students with a supervised, full-time experience of at least 9 months ~~(and/or 15070 hours)~~ duration, emphasizing relationally focused practice.”* In the Texas Tech MFT ~~doctoral~~ program, “full-time” is interpreted to mean approximately 5-8 hours a week on site(s). The internship external placement typically begins in the 2<sup>nd</sup> year of the master’s program, and each student must complete sufficient direct client contact hours to achieve the total of 300-500 ~~(150 individual and 150 relational)~~ 40% relational direct client contact hours required for completion of the master’s degree. One hundred and fifty of those hours will take place in the external placement. Further, the student should consider whether the internship external placement will provide sufficient hours of direct client contact and supervision to meet licensure and/or clinical membership requirements. Direct contact hours must be supervised by an AAMFT-Approved Supervisor or equivalent, and supervision must take place at least every other week.

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

## II. THE PURPOSE OF AN INTERNSHIP EXTERNAL PLACEMENT

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

## III. PROCEDURES TO BEGIN AN INTERNSHIP EXTERNAL PLACEMENT

- A. First, the student should enter into a dialogue with her/his MFT faculty advisor and the Director of Internship External placements Clinic Director well before approaching potential internship external placement sites. Other MFT faculty may be consulted as well. The product of such a dialogue should be an assessment of the student’s training interests, identification of potential internship external placement sites, and a preliminary statement of the requirements for completion of the internship external placement.
- B. Second, the student should approach potential internship external placement sites to determine which site(s) will meet the internship external placement requirements for that student. Once agreement is reached with the site, the

student will complete the development of a formal InternshipExternal placement Proposal to be submitted to the MFT faculty advisor and Director of InternshipExternal placementsClinic Director for approval.

- C. Third, once the InternshipExternal placement Proposal is approved, the InternshipExternal placement Agreement must be completed by the site(s), and returned to the Director of InternshipExternal placementsClinic Director.
- D. Any change in the InternshipExternal placement Proposal or InternshipExternal placement Agreement(s) must be approved by the student's MFT faculty advisor and the Director of InternshipExternal placementsClinic Director.

#### **IV. WHO IS QUALIFIED TO BEGIN AN INTERNSHIPEXTERNAL PLACEMENT**

- A. The student must be in good standing in the MFT program (individuals on academic or clinical probation or on leave of absence cannot apply)
- B. The student must have completed the majority of organized coursework in Areas VII (theory), VIII (clinical practice), IX (individual development and family relations), and 1<sup>st</sup> year clinical courses a minimum of three semesters of coursework and preferably four semesters of coursework.
- C. The student must have completed practicum direct client contact/supervision total/individual supervision hours/group supervision hours (15/70/630/30/30) a minimum of three semesters of practicum and be enrolled in their fourth semester of practicum..
- D. The student must be sufficiently advanced in the MFT program to maximally benefit from the internshipexternal placement experience. This means that internshipexternal placement activities do not interfere with completion of coursework and continued progress in the MFT program and vice versa.
- E. Preferred Qualifications
  - 1. Completed at least 100-250 direct contact clinical hours and have completed intro to practicum and three semesters of practicum (spring, summer I, and summer II).
  - 2. No incompletes

#### **V. DOCUMENTATION REQUIRED BEFORE THE INTERNSHIPEXTERNAL PLACEMENT BEGINS**

- A. InternshipExternal placement Proposal
- B. Student's current *curriculum vitae*
- C. InternshipExternal placement Supervisor Application (required of each supervisor)
- D. InternshipExternal placement Agreement from each site



## VI. SUPERVISION OF INTERNSHIP EXTERNAL PLACEMENT

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

## VII. DOCUMENTATION REQUIRED IN THE INTERNSHIP EXTERNAL PLACEMENT

- A. Meekly Clinical Supervision Report (MCSR). The MCSR must be submitted for each month and each site in the internship external placement. The AAMFT-Approved Supervisor (or equivalent) must sign each MCSR, along with the Director of Clinical Training. The MCSR, with appropriate signatures, must be submitted to the Director of Clinical Training within 30 days of the last day of the month of the report.
- B. The internship external placement requirements are deemed completed once all of the following criteria have been met:
  - a. The duration of the internship external placement experience has lasted a minimum of nine (9) months and no more than twelve (12) months; and
  - b. The concluding date as stipulated on each “Internship External placement Agreement” form has been reached; and
  - c. All required evaluation forms for each internship external placement site have been filed with the Director of Internship External placements; and
  - d. The student has accumulated a minimum of 300 documented and verified hours of direct face-to-face client contact as required by to complete the master’s in MFT; and
  - e. A certificate of completion addressing the internship external placement experience has been placed in the student’s program file.

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

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

## VIII. INTERNSHIP EXTERNAL PLACEMENT SITE REQUIREMENTS

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

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

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

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

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

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

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

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

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

The internship external placement supervisor will be clearly senior in experience to the intern.

# Texas Tech University

MS in Marriage and Family Therapy and Addictive Disorders and Recovery Studies  
Box 41210  
Lubbock, TX 79409-1210  
(806) 742-3060

## EXTERNAL PLACEMENT AGREEMENT

This agreement is made on \_\_\_\_\_ by and between  
(date)

\_\_\_\_\_, \_\_\_\_\_,  
(Student) (External Placement Site)

and The Marriage and Family Therapy Program at Texas Tech University. The agreement will be effective from \_\_\_\_\_ to \_\_\_\_\_ for the external  
(start date) (concluding date)  
placement of \_\_\_\_\_.  
(student's name)

### **Purpose:**

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

### **Texas Tech University MFT Program Responsibilities:**

1. Select external placement candidates who have successfully completed all prerequisite courses and practica for external placement.
2. Facilitate placements conducive to the student's training needs and qualifications, and the interests and capacities of the external placement agency.
3. Provide information to both the student and external placement site delineating the responsibilities of the MFT program, the external placement agency, and the student.
4. Maintain a collaborative relationship with the external placement site.
5. Monitor student development throughout the experience and provide grades based on the student's performance.
6. Maintain records of student's client contact and supervision hours completed during external placement.
7. Students will be covered under malpractice liability coverage by TTU at no additional charge to the site.

**External Placement Site Responsibilities:**

1. Maintain charter or license by appropriate state authority.
2. Provide a caseload sufficient to fulfill the student's client contact requirements as described under Student Responsibilities.
4. Maintain contact with the MFT MS Director of External Placement Training, foster the student's development as a marriage and family therapist in collaboration with the MFT MS program, and advise of any difficulties encountered with the student's performance.
5. Provide adequate facilities and training to the student relevant to the performance of assigned responsibilities.
6. Provide a confidential office space for the student intern to conduct therapy services.
7. Supplies and materials to create the required record-keeping of therapy services.
8. A secure file to store confidential records of the therapy services provided.
9. Provide documentation of the student's client contact and supervision hours to the MFT Director of External Placement Training.
10. Provide written evaluations (at least two over the course of the external placement) of the student's performance to the MFT Director of External Placement Training.
11. An administrative supervisor who will agree to sign the documentation form of monthly hours completed at the site by the student.

**Student Responsibilities:**

1. Maintain responsibility for assigned cases throughout the external placement.
2. Adhere to the policies and standards of professional practice set forth by the MFT program and external placement site.
3. Complete a sufficient number of on-site, direct client contact hours, of which at least 50% must be with couples and families.
4. Complete a minimum of nine (9) months of external placement experience.
5. Complete on-site supervision with student
6. Maintain regular contact (no less than monthly) with the MFT Director of External Placement Training and advise of any difficulties encountered associated with the external placement experience.

7. Maintain availability for supervision and other necessary appointments with the MFT/ADRS Director of External placement Training as requested.
8. Complete written evaluations regarding the external placement experience as specified in the course syllabus.
9. Ensure that adequate malpractice coverage is maintained throughout the external placement.

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

\_\_\_\_\_  
(Student) Date: \_\_\_\_\_

\_\_\_\_\_  
(External Placement Agency Director) Date: \_\_\_\_\_

\_\_\_\_\_  
(External Placement Site Supervisor) Date: \_\_\_\_\_

\_\_\_\_\_  
(MFT/ADRS Director of External placement Training) Date: \_\_\_\_\_

\_\_\_\_\_  
(MFT/ADRS Program Director) Date: \_\_\_\_\_

**SECTION X**

**DOCTORAL INTERNSHIP**

# INTERNSHIP INFORMATION

## I. DEFINITION OF AN INTERNSHIP

*The internship is to provide doctoral students with a supervised, full-time experience of at least 9 months duration, emphasizing relationally focused clinical practice, research, supervision, or college level teaching.* In the Texas Tech MFT doctoral program, “full-time” is interpreted to mean approximately 30 hours a week on site(s). The internship typically begins in the 3<sup>rd</sup> or 4<sup>th</sup> year of the doctoral program. Further, the student should consider whether the internship will provide sufficient hours of direct client contact and supervision to meet licensure and/or clinical membership requirements. An internship may be carried out sequentially or concurrently at multiple sites.

Prior to beginning the internship, a written internship proposal must be submitted to and approved by the Director of MFT Internships and the MFT Program Director.

## II. THE PURPOSE OF AN INTERNSHIP

Satisfactory completion of an internship is a required component of the TTU doctoral CMFT program. An internship is intended to build on the student’s existing clinical, research, supervision, and/or teaching skills and to provide an intensive professional experience. An internship may be taken in a variety of settings and may include various combinations of research, clinical, and/or teaching activities, depending on the student’s interests, needs, and prior experience. Training is the primary focus of the internship. Establishing an internship involves student-faculty-site collaboration.

## III. PROCEDURES TO BEGIN AN INTERNSHIP

- A. First, the student should enter into a dialogue with her/his CMFT faculty advisor and the Director of Internships well before approaching potential internship sites. Other CMFT faculty may be consulted as well. The product of such a dialogue should be an assessment of the student’s training interests and needs in both research and clinical activities, identification of potential internship sites, and a preliminary statement of the requirements for completion of the internship.
- B. Second, the student should approach potential internship sites to determine which site(s) will meet the internship requirements for that student. Once agreement is reached with the site, the student will complete the development of a formal Internship Proposal to be submitted to the MFT faculty advisor and Director of Internships for approval.

- C. Third, once the Internship Proposal is approved, the Internship Agreement must be completed by the site(s), and returned to the Director of Internships.
- D. Any change in the Internship Proposal or Internship Agreement(s) must be approved by the student's MFT faculty advisor and the Director of Internships.

#### **IV. WHO IS QUALIFIED TO BEGIN AN INTERNSHIP**

- A. The student must be in good standing in the CMFT program (individuals on academic or clinical probation or on leave of absence cannot apply)
- B. The student must have completed the majority of organized coursework in Areas VII (theory), VIII (clinical practice), IX (individual development and family relations), and XI (research) (COAMFTE Standards 509-511)
- C. The student must have completed practicum direct client contact/supervision/individual supervision hours (500/100/50 for students who have not completed a master's degree from an AAMFT-accredited program; 200/40/20 for students who have completed a master's degree from an AAMFT-accredited program).
- D. The student must be sufficiently advanced in the MFT program to maximally benefit from the internship experience. This means that internship activities do not interfere with completion of coursework and continued progress in the MFT program and vice versa.
- E. Preferred Qualifications
  - 1. completed qualifying examinations
  - 2. have proposed dissertation and started data collection
  - 3. no remaining (or very few) required courses
  - 4. no incompletes
  - 5. licensed as a Marriage and Family Therapist (either as associate or fully licensed)

## **V. DOCUMENTATION REQUIRED BEFORE THE INTERNSHIP BEGINS**

- A. Internship Proposal
- B. Student's current *curriculum vitae*
- C. *Internship Supervisor Application* (required of each supervisor at each site)
- D. *Internship Agreement from each site*

## **VI. SUPERVISION OF INTERNSHIP**

In an internship that involves direct client contact, the intern must meet with an AAMFT Approved Supervisor (or equivalent) at least every other week for case supervision. When the internship involves multiple clinical sites, each site must agree to a plan of supervision for the intern. This could involve a single Approved Supervisor or multiple Approved Supervisors. Regardless of the Approved Supervisor, each site must provide an administrative and/or clinical supervisor who is responsible for the efforts of the intern and who provides supervision of cases at least every other week. If that supervisor is not an AAMFT Approved Supervisor, the student must still obtain appropriate supervision.

In internships designed to provide experience to supervisors in training, at least one of the student's direct supervisor must be an AAMFT Approved Supervisor or equivalent and meet the minimum requirements to provide supervision of supervision.

In internship sites focused on research or teaching, the student's supervisor must possess the necessary qualifications to provide supervision of the student activities and the ability to help foster a productive training environment.

## **VII. DOCUMENTATION REQUIRED IN THE INTERNSHIP**

- A. Monthly Clinical Supervision Report (MCSR). The MCSR must be submitted for each site in the internship if the internship involves clinical training or supervision experience. The AAMFT-Approved Supervisor (or equivalent) must sign each MCSR, along with the Director of Clinical Training. The MCSR, with appropriate signatures, must be submitted to the Director of Clinical Training within 30 days of the last day of the week of the report.
- B. The internship requirements are deemed completed once all of the following criteria have been met:
  - a. The duration of the internship experience has lasted a minimum of nine (9) months and no more than twelve (12) months; and
  - b. The concluding date as stipulated on each "Internship Agreement" form has been reached; and

- c. All required evaluation forms for each internship site have been filed with the Director of Internships; and
- d. The student has accumulated a minimum of 250 documented and verified hours of direct face-to-face client contact as required by to complete the doctorate in MFT; and
- e. A certificate of completion addressing the internship experience has been placed in the student's program file.

Should it become evident that an internship experience will stretch beyond the maximum twelve (12) month period, a new "Internship Agreement" form must be completed and submitted to the Director of Internships prior to the expiration date of the original agreement.

- C. At the completion of the internship or upon leaving an internship site, The Intern/Extern Self Evaluation (student), the Intern/Extern Evaluation & Stakeholder Survey (separately, AAMFT-Approved Supervisor and the site supervisor(s)), must be completed electronically through the Qualtrics system. The Director of Internships will provide an electronic link.

#### **VIII. INTERNSHIP SITE REQUIREMENTS**

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

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

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

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

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

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

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

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

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

The internship supervisor will be clearly senior in experience to the intern.

#### **IX. INTERNSHIP CREDIT HOURS**

Students must be enroll in a minimum of 6 credits of internship (MFT 7359) while completing the internship requirements. Students may not count clinical hours from an external clinical site if they are not enrolled in internship and/or have not completed the necessary internship agreements.

# Texas Tech University

Marriage and Family Therapy Program  
Box 1250  
Lubbock, TX 79409-1250  
(806) 742-3060

## INTERNSHIP AGREEMENT

This agreement is made on \_\_\_\_\_ by and between  
(date)

\_\_\_\_\_, \_\_\_\_\_,  
(Student) (Internship Site)

and The Marriage and Family Therapy Program at Texas Tech University. The agreement will be effective from \_\_\_\_\_ to \_\_\_\_\_ for the internship of  
(start date) (concluding date)

\_\_\_\_\_.  
(student's name)

### **Purpose:**

The purpose of this agreement is to specify the conditions for internship placement of a qualified MFT doctoral student.

### **Texas Tech University MFT Program Responsibilities:**

1. Select internship candidates who have successfully completed all prerequisite courses and practica for internship placement.
2. Facilitate placements conducive to the student's training needs and qualifications, and the interests and capacities of the internship agency.
3. Provide information to both the intern and internship site delineating the responsibilities of the MFT program, the internship agency, and the intern.
4. Maintain a collaborative relationship with the internship site.
5. Monitor student development throughout the internship and provide grades based on the student's performance.
6. Maintain records of student's client contact and supervision hours completed during internship.

**Internship Site Responsibilities:**

1. Maintain charter or license by appropriate state authority.
2. Provide a caseload sufficient to fulfill the intern's client contact requirements as described under Intern Responsibilities.
3. Provide a minimum of 100 hours of supervision by an AAMFT Approved Supervisor, Supervisor-In-Training, or alternate supervisor approved by the MFT faculty, and a minimum of one hour of supervision for every five hours of client contact.
4. Maintain contact with the MFT Director of Internship Training, foster the intern's development as a marriage and family therapist in collaboration with the MFT program, and advise of any difficulties encountered with the intern's performance.
5. Provide adequate facilities and training to the intern relevant to the performance of assigned responsibilities.
6. Provide documentation of the intern's client contact and supervision hours to the MFT Director of Internship Training.
7. Provide written evaluations of the intern's performance to the MFT Director of Internship Training.

**Intern Responsibilities:**

1. Maintain responsibility for assigned duties throughout the internship.
2. Adhere to the policies and standards of professional practice set forth by the MFT program and internship site.
3. Complete a sufficient number of on-site, direct client contact hours, of which at least 40% must be with couples and families, if additional clinical hours are needed to meet program requirements.
4. Complete a minimum of nine (9) months of internship experience.
5. Complete hours of on-site supervision with an AAMFT Approved Supervisor, supervisor-In-Training, or alternate Supervisor approved by the MFT faculty, if meeting program requirements for clinical hours as part of internship.
6. Maintain regular contact (no less than monthly) with the MFT Director of Internship Training and advise of any difficulties encountered associated with the internship experience.

7. Maintain availability for supervision and other necessary appointments with the MFT Director of Internship Training as requested.
8. Complete written evaluations regarding the internship experience as specified in the course syllabus.
9. Ensure that adequate malpractice coverage is maintained throughout the internship.

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

_____	Date: _____
(Student)	
_____	Date: _____
(Internship Agency Director)	
_____	Date: _____
(Internship Site Supervisor)	
_____	Date: _____
(MFT Director of Internship Training)	
_____	Date: _____
(MFT Program Director)	

Texas Tech University  
Marriage and Family Therapy Program

**INTERNSHIP SUPERVISOR APPLICATION**

Please provide the following information: Date: \_\_\_\_\_

Supervisor Name: \_\_\_\_\_ Intern Name: \_\_\_\_\_

Name of Agency: \_\_\_\_\_

Agency Address & Phone Number: \_\_\_\_\_  
\_\_\_\_\_

If supervision is to be provided in a location separate from the above listed agency, please indicate the location (agency name, private office, etc.) where supervision will be conducted.  
\_\_\_\_\_

Intended Beginning Date for Supervision: \_\_\_\_\_

**Supervisor Background:**

Highest Degree Attained: \_\_\_\_\_ Area (MFT, Psychology, etc.): \_\_\_\_\_

Year Degree Awarded: \_\_\_\_\_ Granting Institution: \_\_\_\_\_

**I. Licensure**

A) Do you hold a current license in marriage and family therapy? \_\_\_\_\_

If yes, in what state(s)? \_\_\_\_\_

In what year did you initially receive your license in marriage and family therapy? \_\_\_\_\_

What is your license number? \_\_\_\_\_

Note: *Please attach a copy of your current license to this application*

B) Do you hold a license in any other area of clinical practice? \_\_\_\_\_

If yes, in what professional area (social work, counseling, psychology, etc)? \_\_\_\_\_

C) Has your license ever been revoked or suspended? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

D) Are any complaints currently pending against you before your state's licensing board? \_\_\_\_\_

If yes, please explain \_\_\_\_\_

**II. MFT Clinical Experience**

A) Please indicate the number of years you have been practicing marriage and family therapy. \_\_\_\_\_

B) Please indicate the approximate number of direct client contact hours you have completed in each of the following areas:

- Individual Adult Counseling/Therapy \_\_\_\_\_
- Individual Child Counseling/Therapy \_\_\_\_\_
- Couple Counseling/Therapy \_\_\_\_\_
- Family Counseling/Therapy \_\_\_\_\_
- Group Counseling/Therapy \_\_\_\_\_
- Other (please specify) \_\_\_\_\_

**III. AAMFT Membership**

A) Are you currently a Clinical Member of the American Association for Marriage and Family Therapy? \_\_\_\_\_

If yes, in what year did you initially become a member? \_\_\_\_\_

B) Are you currently recognized as an Approved Supervisor or Supervisor in Training by the American Association for Marriage and Family Therapy? \_\_\_\_\_

If yes, for how many years have you been an approved supervisor? \_\_\_\_\_

**IV. Training in MFT Supervision**

Please indicate (with yes or no) which of the following training activities you have completed.

A) An AAMFT approved seminar/workshop in MFT supervision \_\_\_\_\_

If yes, please provide dates \_\_\_\_\_, topic (seminar title) \_\_\_\_\_, and location \_\_\_\_\_.

B) A Graduate MFT supervision course through an accredited program \_\_\_\_\_

If yes, please provide dates \_\_\_\_\_, topic (course title) \_\_\_\_\_, and location \_\_\_\_\_.

C) Seminars or Coursework in general (not specific to MFT) supervision \_\_\_\_\_

If yes, please provide dates \_\_\_\_\_, topic (course title) \_\_\_\_\_, and location \_\_\_\_\_.

D) Supervision of Your Supervision of Others \_\_\_\_\_

If yes, please provide dates \_\_\_\_\_, degree and discipline of supervisor (i.e., psychology) \_\_\_\_\_. Was your supervisor licensed as a marriage and family therapist? \_\_\_\_\_ Was your supervisor Approved by the AAMFT? \_\_\_\_\_

E) Other Training, Study, or Preparation for Supervision \_\_\_\_\_

If yes, please specify \_\_\_\_\_

## V. MFT Supervision Experience

A) For how many years have you been supervising marriage and family therapy trainees?  
\_\_\_\_\_

B) Please indicate the total number of supervision hours you have completed in each of the following:

\_\_\_\_\_ Individual MFT Supervision  
\_\_\_\_\_ Group (2 or more supervisees) MFT Supervision  
\_\_\_\_\_ Individual (Non MFT) Supervision  
\_\_\_\_\_ Group (Non MFT) Supervision

C) How many trainees do you currently supervise? \_\_\_\_\_

D) Please indicate the percentage of supervision you devote to each of the following (total should = 100)

\_\_\_\_\_ Live Supervision  
\_\_\_\_\_ Videotape Review  
\_\_\_\_\_ Audiotape Review  
\_\_\_\_\_ Case Discussion (without video or audio review)  
\_\_\_\_\_ Other (please specify \_\_\_\_\_)

Thank you for your cooperation in providing the requested information. Please feel free to contact the Director of Internship Training should you have any concerns or questions pertaining to these matters.

### All inquiries can be directed to:

Nicole Springer, Ph. D.  
Director of Internship Training  
Box 41250  
Marriage and Family Therapy Program  
Texas Tech University  
Lubbock, TX 79409-1250  
Phone: (806) 742-3074

***CERTIFICATION OF INTERNSHIP COMPLETION***

***This letter certifies that \_\_\_\_\_ has successfully fulfilled the doctoral internship requirements of The Marriage and Family Therapy Program at Texas Tech University by completing the clinical training, supervision, and therapeutic activities specified in the letter of agreement dated \_\_\_\_\_ with \_\_\_\_\_ for the period \_\_\_\_\_ to \_\_\_\_\_.***

\_\_\_\_\_  
*(MFT Director of Internship Training)*      Date: \_\_\_\_\_

\_\_\_\_\_  
*(MFT Program Director)*      Date: \_\_\_\_\_

**SECTION XI**

**DOCTORAL SUPERVISION**

**Required Supervision Courses.** In order to complete the doctoral program in MFT and begin the process of becoming an AAMFT Approved Supervisor, each student must successfully complete MFT 6396 (Supervision in MFT) and MFT 6397 (Practicum in Supervision in MFT) or their equivalents.

1. Requirements to enroll in MFT 6396:
  - a. *For all MFT doctoral students:* To enroll in MFT6396, students MUST have completed a minimum of 500 hours of direct client contact and 200 hours of direct client contact as part of the TTU doctoral program. At least 40% of these hours must be relational—direct service to couples, families, or other relational systems—under the supervision of an AAMFT Approved Supervisor (or equivalent).
  - b. Students who enter the MFT program with a master’s degree from a COAMFTE-accredited program may enroll in MFT 6396 at the beginning of their second year, but not before. Because all such students must complete additional clinical work, they will have more than the required 500 hours. Again, exceptions to this rule must be approved by the course instructor in advance.
  - c. Students who enter the MFT program with a master’s degree from a non-COAMFTE accredited program (MFT or other discipline) are required to complete the 500 hours before being allowed to take MFT 6396. Again, exceptions to this rule must be approved by the course instructor in advance.
2. Requirements to enroll in MFT 6397
  - a. Must currently enrolled in or successfully completed MFT 6396.
  - b. Demonstration of an understanding of the specific requirements for Approved Supervisor status including:
    - i. Number of trainees and period of supervision required
    - ii. Hours of supervision of trainees required
    - iii. Hours of supervision-of-supervision required
    - iv. Hours of clinical experience or years of full MFT licensure required
    - v. Overall process of applying for Approved Supervisor status.
3. Supervision experiences
  - a. Beginning in the Fall term each year (MFT 6396), each Supervisor Candidate will be assigned as a “mentor” for one or more junior MFT students. The mentor will provide consistent and regular supervision to the supervisee across the 12-month school year or beyond.
  - b. The Supervisor Candidate will receive a minimum of 18 hours of supervision-of-supervision from the course instructor over the 12-month school year.
  - c. The Supervisor Candidate will provide a minimum of weekly supervision of the supervisee over the same period. Typically, supervision will include at least an hour of face-to-face individual supervision with the supervisee, along with additional sessions spent observing and assisting the supervisee in therapy sessions.

The TTU MFT Doctoral Program is designed to meet the requirements of the Doctoral Track for becoming an AAMFT Approved Supervisor. The Doctoral Track Requirements are:

### **Training Requirements Unique to Students/Graduates of COAMFTE accredited MFT Doctoral Programs: Doctoral Track**

Graduates of COAMFTE accredited doctoral programs may apply for the Approved Supervisor designation before they are eligible for Clinical Fellow membership in AAMFT. Individuals who attend doctoral programs but do not graduate are not penalized for the hours they complete, but must complete all requirements for the designation as outlined in Section One, including obtaining Clinical Fellow membership in AAMFT before applying for the designation.

The following adjustments have been made to reflect the unique training context and path to AAMFT membership and employment for students graduating from COAMFTE accredited doctoral programs. These requirements allow MFT doctoral students/graduates to complete most, if not all, of their supervisor training while in their programs, regardless of AAMFT Clinical Fellow membership eligibility. Because it is important that supervisors (whether doctoral graduates or not) have clinical and supervisory/mentoring experience sufficient to make them competent supervisors, doctoral students and graduates are expected to follow the same procedures and requirements for becoming AAMFT Approved Supervisors as stated in this handbook, except as amended below.

#### Doctoral students may begin supervision training if:

- They are accepted into a COAMFTE accredited doctoral program;
- They are members of AAMFT at the highest level for which they are eligible (Student or Pre-Clinical Fellow membership is acceptable); and
- The program has a faculty member who qualifies and serves as an Approved Supervisor mentor for students.

Supervisor candidates who provide supervision for other students in the program must have more clinical experience and academic training than the MFT trainees being supervised.

#### Graduates of COAMFTE accredited doctoral programs may apply for the AAMFT Approved Supervisor designation if:

- They have two years of MFT or other mental health post-master's clinical experience with clinical or supervisory hours not specified;
- They have one year of post-master's degree experience in couple/marital and family therapy supervised by an AAMFT Approved Supervisor or supervisor candidate;
- They are clinically active as MFTs;
- They complete a Fundamentals of MFT Supervision course in the doctoral program;

- They complete at least one year of supervision under mentorship other than that which occurs during a Fundamentals of Supervision course (this may be before the course for clinically experienced students as determined by the program);
- They complete at least 180 hours of supervising MFTs/trainees under at least 36 hours of mentorship by AAMFT Approved Supervisor mentors over at least 18 months;
- Mentoring during the MFT program was conducted by at least one Approved Supervisor faculty member;
- They are at least Pre-Clinical Fellow members of AAMFT at the time of application for the designation. Individuals applying under the doctoral track who are eligible for Clinical Fellow membership must be Clinical Fellow members at the time of application.

Note for individuals who attended but did not graduate from COAMFTE accredited doctoral programs:

Individuals who attend but do not graduate from COAMFTE accredited doctoral programs may count a Fundamentals of Supervision course and all of their supervision and mentoring hours during the program toward the Approved Supervisor designation but must fulfill all other requirements, including total supervision and mentoring hours, and Clinical Fellow membership at time of application for the designation as outlined in Section One. All Approved Supervisors must be Clinical Fellows at the time of their next 5 year designation renewal, regardless of membership status at the time of applying for the designation.

A complete discussion of the requirements is available in the *Approved Supervisor Designation Handbook*.

[Approved Supervision Designation](#)

## APPROVED SUPERVISOR'S EVALUATION

The Approved Supervisor mentor uses this form to evaluate the supervisor candidate's knowledge and skill, and the candidate's readiness to receive the Approved Supervisor designation. Once complete, the Approved Supervisor should return this rating sheet to the supervisor candidate for inclusion in the Approved Supervisor application packet that will be sent to AAMFT. Please DO NOT submit this form to the AAMFT separately from the Approved Supervisor application packet.

Supervisor candidate: \_\_\_\_\_

Approved Supervisor: \_\_\_\_\_

The evaluation is broken into three sections:

- I. The Approved Supervisor mentor's assessment of how well the supervisor candidate has integrated the nine learning objectives during his/her training process.
- II. The supervision candidate's philosophy of supervision, as described in his/her Philosophy of Supervision paper written during the MFT supervision fundamentals course;
- III. The Approved Supervisor mentor's evaluation of the supervisor candidates skill as a supervisor, based on the 36 hours of observation/supervision mentoring sessions; and

In order to be considered for the Approved Supervisor designation, the candidate should achieve a score of at least "acceptable" (2) in every category listed, and an overall average of "excellent" (3) or better in each of the sections. For evaluation scores of "minimal" (1) or lower, the Approved Supervisor mentor and supervisor candidate should discuss the issue and develop a plan for remediation before the Approved Supervisor application packet is submitted to the AAMFT.

**Scoring: Use the following scale to rate the supervisor candidate:**

Number	Rating	Definition
0	<b>Insufficient</b>	The candidate does not demonstrate an understanding of this concept or learning objective. With regard to the candidate's Philosophy of Supervision paper, he/she does not address the issue.
1	<b>Minimal</b>	The candidate can discuss the concept or issue, but does not integrate it within his/her overall framework. In the candidate's Philosophy of Supervision paper, she/he names the concept or issue, but does not provide a basic definition of the concept or issue.
2	<b>Acceptable</b>	The candidate has an adequate grasp of the concept or issue and sometimes integrates it within his/her overall framework. Regarding the Philosophy of Supervision paper, he/she names and provides a basic definition of the concept or issue, but does not provide an explanation of the concept or issue.
3	<b>Excellent</b>	The candidate is familiar with the concept or issue and often integrates it within his or her overall framework. Regarding the Philosophy of Supervision paper, the candidate names, defines and explains the concept or issue.
4	<b>Exceptional</b>	The candidate exhibits an excellent grasp of the concept, and consistently integrates it within his/her overall framework. Regarding the Philosophy of Supervision paper, the candidate names, defines, and explains and integrates the concept or issue.

## APPROVED SUPERVISOR'S EVALUATION

*Please score each objective and place the average score for the section in the last box*

<b>I. Integration of Nine Learning Objectives for Prospective Approved Supervisors</b>	<b>Scoring</b>
1. Is the supervisor candidate familiar with the major models of MFT supervision in terms of their philosophical assumptions and pragmatic implications?	0 1 2 3 4
2. Can the candidate articulate a personal model of supervision, drawn from existing models of supervision and from her/his preferred styles of therapy?	0 1 2 3 4
3. Does the candidate facilitate the co-evolving therapist-client and supervisor-therapist-client relationships?	0 1 2 3 4
4. Does the candidate evaluate and identify problems in therapist-client and supervisor-therapist-client relationships?	0 1 2 3 4
5. Can the candidate structure supervision, solve problems, and implement supervisory interventions within a range of supervisory modalities (for example, live and videotaped supervision)?	0 1 2 3 4
6. Is the candidate able to address distinctive issues that arise in supervision mentoring?	0 1 2 3 4
7. Is the candidate sensitive to contextual variables such as culture, gender, ethnicity and economics?	0 1 2 3 4
8. Is the candidate knowledgeable of ethical and legal issues of supervision?	0 1 2 3 4
9. Is the candidate aware of the requirements and procedures for supervising applicants for AAMFT Clinical Membership?	0 1 2 3 4
<b>Average Score on Learning Objectives</b>	

*Please score each item and place the average score for the section in the last box.*

<b>II. Evaluation of Supervisor Candidate's Evolving Philosophy of Supervision, as Written in the Candidate's Philosophy of Supervision Paper. In the paper:</b>	<b>Scoring</b>
1. Does the supervisor candidate think about treatment and supervision in relational terms (for example, in terms of patterns, sequence, context)?	0 1 2 3 4
2. Does the supervisor candidate have an awareness of patterns and sequences of replication at various system levels (for example, interconnection and interrelationships of the individual, family, therapist, supervisor, and context of training)?	0 1 2 3 4
3. Does the supervisor candidate demonstrate knowledge of the MFT supervision literature by citing recent articles, chapters, and/or books, and how his/her supervision philosophy and methods relate to the current MFT supervision literature?	0 1 2 3 4
4. Does the supervisor candidate demonstrate a clear theoretical orientation by articulating his/her philosophies of therapy and supervision as well as the clear connection between them?	0 1 2 3 4

**SECTION XII**  
**MASTER'S THESIS**

**TEXAS TECH UNIVERSITY  
MFT PROGRAM**

**Master's Thesis**

**I. Committee**

The student is responsible for forming his/her thesis committee with the advice and consent of her/his Thesis Advisor. The Thesis Advisory Committee shall be composed of at least three members of the graduate faculty from within MFT and ADRS and at least one graduate faculty member outside MFT and ADRS (either within or outside of the college). The Thesis Advisor (Chair) must be a member of the full-time MFT or ADRS graduate faculty. On all committees there must be at least one MFT faculty. For the thesis, students should sign up for 3 credits of MFT 6000 under the major advisor and for 1 hour under each of the three committee members, for a total of 6 hours.

**II. Proposal**

The thesis proposal is prepared in consultation with the advisor. Guidelines for the formatting of the thesis should be obtained by the student from the Graduate School or the Texas Tech Bookstore. Guidelines for the content of the thesis is on the document "Thesis Components for TTU MFT Doctoral Students" which should be followed carefully.

When the advisor has approved the proposal, it is submitted to the other members of the committee, and a proposal meeting is scheduled. The committee **MUST** have a minimum of **two** weeks between the time they receive the proposal and time of the meeting. If the committee members do not receive the document within two weeks, the meeting must be rescheduled. If the committee approves the proposal, the student may proceed with the project; if the proposal is not approved during this meeting, the student will be asked to work with the committee in revising the document. When the proposal is approved, the student must fill out the "Approval of Thesis Proposal Form" and acquire the signature of all committee members. The original completed form must then be turned into the MFT secretary. This form will be placed in the student's permanent file. Committee signatures on a proposal form are an important safeguard for the student and should be obtained prior to proceeding with the research. Once the proposal is approved, the appropriate human subject forms must be submitted and approved before data collection can begin. (See section on Human Subjects.)

**III. Defense**

The student works with his/her advisor in preparing the final document. When the advisor has approved the document, copies are submitted to each member of the committee. The committee members **MUST** have at least **two** weeks to review the document and make

suggestions. At this stage, the student may spend several months working with committee members. When all committee members have agreed that the thesis/thesis is ready to defend, the defense may be scheduled. Because of Graduate School deadlines, the committee approval must be obtained at least **three** weeks prior to the scheduled defense. The student is responsible for meeting the deadlines of the Graduate School for scheduling of the defense. Prior to the defense, the student should fill out the "Approval of Thesis" form to be signed by committee members upon approval of the final thesis. The original signed copy of the final approval of the thesis must be turned in to the MFT Secretary to be placed in the student's permanent file. Students must provide a bound copy of the final thesis document to each committee member and to the department.

**ORAL DEFENSE FOR THE Thesis**  
**List of Major Steps as Required by the Graduate School**

The Semester you plan to Graduate, do the following FIRST.

1. File your "Statement of Intention to Graduate" with official title of the thesis listed. with the Graduate Dean.
2. Pay your associated fees at Student Business Services.
3. As is the case with every other semester, be sure that you are enrolled for thesis hours with each committee member.

After Completing your Thesis Draft

At least FIVE WEEKS before you plan to defend:

1. After first obtaining approval from your advisor, circulate copies of your draft to the other members of your advisory committee.
2. Allow two weeks for your committee to review your draft. During the second week, your committee should have feedback concerning your draft.
3. You may set the date for the defense ONLY after having the approval of all members of the advisory committee to do so.

Setting your Thesis Defense Date

At least THREE WEEKS before you plan to defend:

1. Set a time and day for the defense.
2. The student and faculty should work together to assure that faculty are available to review written documents according to the policy stated here. (Sometimes faculty have out-of-town professional obligations).
3. Reserve a room for your defense. The MFT Secretary can help you with this or you may make reservations through the Dean's office. The examination is a formal public affair, and should be scheduled in a room conducive to general attendance by faculty members and students.
4. Write your defense announcement and obtain approval from your advisor. Take one (1) copy to the MFT Secretary for posting.
5. Submit your signed notification form and UMI abstract.
6. Suggest a Dean's representative to the Graduate School. Provide a copy of the thesis to this representative.

After Your Defense

1. Submit an electronic copy of the thesis to the graduate school.
2. Articles based upon the thesis should be written and submitted. Except under extraordinary circumstances, the student is first author and the advisor is second author on the main article to come from the thesis research. Authorship follows APA guidelines.

## Thesis Components for TTU MFT Doctoral Students

*Adapted from guidelines from the Santa Barbara Graduate Institute and the book "How to prepare a thesis proposal" by Krathwohl and Smith (2005).*

The rubric on the following pages is meant to help MS students understand what constitutes a quality thesis in the MFT program at TTU. The thesis is a key component of meeting our student learning outcomes. Specifically, the thesis will demonstrate proficiency in the candidate's ability to conduct original research in the profession. See also Chapter 2 of the APA *Sixth Edition* Publication Manual for components and examples of research manuscripts.

Students should see TTU's guidelines for formatting and submitting thesis for additional technical information. It is also helpful to review other completed thesis to see their formatting and content. In regard to components, there is some flexibility, especially for qualitative studies, which may deviate from the format below in presentation of results. However, in general students will do well to follow carefully these guidelines.

Although some overlap or building upon the student's previous independent work is acceptable (e.g., there may be similar areas of literature review in the articles), self-plagiarism is not. Students must be first author on all articles, and other students should not be co-authors. The chair or other committee members may be authors on some or all of the eventual submissions.

The traditional format usually consists of the elements described below, arranged in five chapters: Introduction, Literature Review, Methods, Results, and Discussion. Variations on the traditional format may be warranted by the study design (e.g. qualitative study) and approved by the thesis committee.

## Title Page

\_\_\_\_\_ **Layout:** The student has precisely followed the title page layout requirements that are stipulated in the TTU thesis guidelines.

\_\_\_\_\_ **Title:** The title is succinct and descriptive of the research. If a quantitative study is proposed, the title includes the primary independent and dependent variables (e.g., The Impact of Structural Family Therapy on Generalized Anxiety Disorder).

**Other Thesis Pages.** These will consist of pages as designated by the TTU formatting guidelines (e.g., signature pages).

**Abstract.** The abstract is a short overview of the proposed research. It should include the following items.

\_\_\_\_\_ **Pagination:** The abstract starts on a new page.

\_\_\_\_\_ **Word count:** The abstract does not exceed 250 words.

\_\_\_\_\_ **Tense:** The abstract is written in the past tense (except for the proposal abstract).

\_\_\_\_\_ **Content:** The abstract summarizes the study:

\_\_\_\_\_ The abstract indicates what the thesis's research questions (if a qualitative or mixed-methods study) or hypotheses (if a quantitative or mixed-methods study) were.

\_\_\_\_\_ The abstract describes the participants (e.g., "30 post-menopausal women in their 40s who suffer from clinical depression and live in the Denver area").

\_\_\_\_\_ The abstract summarizes what methods were used to collect and analyze the data.

\_\_\_\_\_ The abstract summarizes the study's key findings.

\_\_\_\_\_ **Clarity:** The abstract is readable, coherent, well-organized, concise, and self-contained.

\_\_\_\_\_ **Key words:** Because the abstract is often indexed in research databases, the student may wish to embed key words in it so that researchers searching computerized databases can access it easily.

## Table of Contents (TOC)

- \_\_\_\_\_ **Pagination:** The TOC starts on its own page and is labeled Table of Contents.
- \_\_\_\_\_ **Headings:** The TOC lists all of the headings and subheadings that appear in the thesis with their accompanying page numbers which are printed with a dot leader and are justified flush right.
- \_\_\_\_\_ **Heading Structure:** The TOC shows that the hierarchical organization of headings and subheadings in the manuscript is correct. That is, the manuscript does not have any instances of a single subheading within a section. This is shown in the TOC by there being at least two entries of the same level below any entry of a higher level. (If there is only one entry below an entry of a higher level, the student has not structured the sections and subsections of the manuscript correctly and needs to fix this in the body of the document.)

**Introductory Chapter (One).** The introduction needs to address each of the elements stipulated below (except where otherwise noted). The order in which the student incorporates the elements is up to his or her discretion, provided that there is a logical flow. The aim of the introduction is to provide an overview of the study and to engage the reader by why this research is interesting, important, and necessary.

- \_\_\_\_\_ **Pagination:** Like all chapters in the thesis, the introduction starts on the top of a new page.
- \_\_\_\_\_ **Headings:** The introduction, like all chapters in the thesis, is divided into meaningful subsections each with its own heading. (The only exception to this is that the very first section of the introduction should NOT have any heading.)
- \_\_\_\_\_ **Study Focus:** The introduction elucidates what the focus of the study is. The topic should be focused but not trivial.
- \_\_\_\_\_ **Study Importance:** The introduction explains why the focus of the research is a significant problem worthy of study. Specifically, it draws on the literature to provide a brief, well articulated, and engaging argument for the need for the research. (Please bear in mind that the fact that something has not been studied before is not a sufficient argument for why it should be studied. Also, it is generally preferable to study a topic that is important in its own right and not just a narrow issue about the MFT profession. For example, clinical research on a juvenile anxiety is preferred to just studying MFT supervisor stressors).
- \_\_\_\_\_ **Inquiry Framework:** The introduction clarifies what theoretical issue(s) the research will draw upon or illuminate. The thesis research needs to be driven by, grounded in, and make a contribution to theory.

\_\_\_\_\_ **Terms:** If technical or other specialized terms are used (e.g., psychological or family systems concepts), it is helpful to have a section defining them (by drawing on the literature, NOT the dictionary). This is often done in a subsection at the end of this chapter.

\_\_\_\_\_ **Inquirer's stake:** The introduction may (but is not required to) include a *brief* discussion on what the author's personal stake is in the research, that is, why this project is personally meaningful to him or her. This is particularly relevant for qualitative work.

\_\_\_\_\_ **Study Boundaries:** Statement of study boundaries, presuppositions, trade-offs, and limitations, including what the study will not do.

\_\_\_\_\_ **Summary:** By the end of the introductory chapter, the reader knows what the author studied (or is proposing to study). This is usually established by a Purpose of Study subheading that lists the research questions and/or hypotheses. Sometimes these complete hypotheses are placed at the end of the Literature Review chapter. If so, give a shorter version here and a more thorough version there.

\_\_\_\_\_ **Inquiry Statement(s):** (For quantitative and mixed-methods studies): The hypotheses are clearly stated by indicating what the study's variables are and what the proposed the relationship is between or among them (e.g., I hypothesize a negative correlation between developmental trauma and capacity for intimacy).

\_\_\_\_\_ **Inquiry Clarity:** The research questions and/or hypotheses make clear sense in light of the introduction.

**Review of the Literature or Manuscript #1 Chapter(s) (Two).** The literature review places the study in the context of previous research. As noted in the *Publication Manual of the American Psychological Association* (6<sup>th</sup> ed.), a scholarly review of earlier work provides an appropriate history and recognizes the priority of the work of others. Citation of and specific credit to relevant earlier works is part of the author's scientific and scholarly responsibility (2009). Students who choose a two article format will include a traditional literature review as the second chapter. For student who choose a three article thesis, Chapter 2 will be a modified lit review that can likely be submitted as a stand-alone article (conceptual, theoretical, or position paper).

\_\_\_\_\_ **Structure:** The literature review is broken into subsections, each with its own heading. These usually correspond to the organization of the research questions/hypotheses.

\_\_\_\_\_ **Sections:** The subsections are ordered in a logical fashion and have a clear relationship to each other (rather than reading as discreet, disconnected blocks of text).

\_\_\_\_\_ **Justification:** The literature review, like the introduction, draws on select literature to *build a case* for why this particular study needs to be conducted.

\_\_\_\_\_ **Selection Process:** The review focuses only on literature *directly pertinent* to the problem addressed in the research (e.g., is attached to the research questions/hypotheses). Chosen based on assessment of scope, relevance, and methodological quality of literature reviewed.

\_\_\_\_\_ **Major Works:** The research discussed in the literature review is drawn from recent peer-reviewed journals (refereed journals), thesiss, and books published by university presses (e.g., Univ. of Washington Press) or academic publishers (e.g., Sage, Routledge, Oxford). The balance weighs most heavily on journals because this is where the most up-to-date empirical findings are published. Secondary source citations are avoided where possible (e.g., According to Smith, Minuchin argued that . . . ).

\_\_\_\_\_ **Implications:** Summary of implications from the literature review (including theoretical positions and their support, empirical evidence, policy statements, and practical knowledge and experience) for (a) understanding the phenomena of interest, and (b) studying the phenomena of interest.

\_\_\_\_\_ **Quality:** The literature review is interesting: it tells a story, rather than reads like a laundry list of previous research. Do not just review previous works, but organize literature conceptually.

\_\_\_\_\_ **Summary:** Summary of literature review and transition to Method Statement.

**Empirical Manuscripts or Methods and Results Chapters (Three and Four).** Chapters three and four will consist of completed individual manuscripts ready for submission to a scholarly journal with significance in the profession of MFT. In addition to the elements of the introduction and literature review, the manuscripts will contain well developed methods, results, and discussion sections:

#### Theoretical and Epistemological Influences and Research Design

\_\_\_\_\_ **Cohesion:** The methodology should connect to the questions asked, and should also indicate the researcher's theoretical and epistemological assumptions about the knowledge being proposed and generated.

\_\_\_\_\_ **Methodological Orientation:** (For qualitative or mixed-methods studies.) The student indicates in which qualitative paradigm the study was grounded (e.g., phenomenology, grounded theory, feminist, ethnography) and why. (In addition to the student's theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of qualitative paradigm.)

\_\_\_\_\_ **Methodological Findings:** This section cites literature to support the use of the above design or orientation. (Optional: Other designs or orientations the student considered but rejected are discussed and why he or she determined these would be less effective is explained.)

\_\_\_\_\_ **Research Design:** (For quantitative or mixed-methods studies.) The student indicates what research design he or she used—that is, what his or her logic of your inquiry was (e.g., experimental, quasi-experimental, comparative case study, cross sectional, longitudinal) and why. (In addition to the student’s theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of design.)

### Participants and Sampling

\_\_\_\_\_ **Participants:** The student describes who he or she studied—that is, who his or her participants were— and indicates why. All characteristics of the sample that are relevant to the study are specified.

\_\_\_\_\_ **Selection Process:** The student indicates the method he or she used to select participants (e.g., purposive sampling, random sampling, convenience sampling, snowball sampling) and why he or she used this method.

\_\_\_\_\_ **Recruitment:** The student indicates how he or she gained access to participants (e.g., through a professional organization’s mailing list, posters advertising the study).

\_\_\_\_\_ **Sample Size:** The student indicates how many people participated in the study and provides a rationale for his or her sample size (whether large or small).

\_\_\_\_\_ **Support of Selection:** This section cites literature to support the use of the above participant selection methods.

### Data Collection

#### Data Collection Method

\_\_\_\_\_ The student indicates what data collection method(s) he or she used (e.g., interviews, diaries, psychological tests, participant observation, archival research) and why.

#### Measures. (For quantitative or mixed methods studies.)

\_\_\_\_\_ The student indicates the quality of the measure (e.g., reliability, validity)

\_\_\_\_\_ The student indicates how he measured the predictor (independent) and outcome (dependent) variables.

\_\_\_\_\_ The student explains why he or she chose these specific operational measures if this has not been explained earlier and the rationale for their use is not self evident.

\_\_\_\_\_ The student indicates which research instruments (e.g., specific psychological tests), if any, were used. (The student provides citations for the instruments and includes them in the appendices).

\_\_\_\_\_ This section cites literature to support the use of the above measures.

Data Collection Procedures. (Required for experiments, otherwise optional.) Students who employed an experimental design need to describe in precise detail how the experiment was conducted. Those who conducted qualitative research or used a quantitative design other than an experiment may opt to include a data collection procedures section if the data collection methods section does not clarify all of the steps that were undertaken to gather the data.

\_\_\_\_\_ The student indicates all of the steps that were undertaken to conduct the experiment/collect the data.

\_\_\_\_\_ (For experiments): The procedures section is sufficiently detailed to allow another researcher to replicate the experiment.

#### Data Analysis Methods.

\_\_\_\_\_ **Analysis:** The student describes methods (e.g., constructivist grounded theory analysis of interviews, examination of field notes, structural equation modeling, dyadic data analysis) and procedures he or she undertook to analyze the data and indicates why he or she employed these methods and procedures.

#### Ethical Protection of Participants

\_\_\_\_\_ **Implications:** The student provides a meaningful reflection on the ethical implications of his or her study.

\_\_\_\_\_ **Anticipated Risk:** The student assesses what the level of risk (physical and psychological) was for those who participated in the study and states how he or she minimized this risk if its level was moderate to high.

## Results

For quantitative studies:

- \_\_\_\_\_ **Structure:** The results section is structured around the hypotheses.
- \_\_\_\_\_ **Components:** For each hypothesis, the student provides the following information:
  - \_\_\_\_\_ The hypothesis
  - \_\_\_\_\_ The data analysis method used to test it (e.g., a Student's t-test, ANOVA)
  - \_\_\_\_\_ The outcome of the analysis (e.g., At  $p < .05$ , the analysis supports [or fails to support] the hypothesis that....), including the relevant statistics (e.g., the *t*-statistic, the *p*-value).
- \_\_\_\_\_ **Table content:** Tables and figures are self-descriptive and informative.
- \_\_\_\_\_ **Table relation:** The tables and figures are clearly related to the narrative in the chapter.

For qualitative studies:

- \_\_\_\_\_ **Structure:** The results section is structured around the research questions. Each question may be examined in its own section of the results.
- \_\_\_\_\_ **Supporting Themes:** Patterns, relationships, and themes reported as findings are supported by appropriate and sufficient evidence that is included in the body of the section. Additional evidence should be included in appendices (e.g., sample transcripts, researcher logs, field notes/memos, etc.).
- \_\_\_\_\_ **Reporting Data:** The section reports on all salient findings, including (and especially) discrepant cases and disconfirming data.

Discussion. The discussion section is where the student explains what they believe their findings mean and why their findings matter. In addition, limitations of the study are discussed as are recommendations for future research.

- \_\_\_\_\_ **Overview:** The discussion section begins with an *overview* of the results, which are summarized, evaluated, and interpreted with respect to the original research questions and/or hypotheses. (A table may be used to organize the findings.)
- \_\_\_\_\_ **Study Contributions:** The section addresses how the study contributes to scientific knowledge in the student's area of interest. More specifically, the section addresses the *theoretical* consequences of the study's results, that is, how the findings inform one or more specific bodies of theory.

\_\_\_\_\_ **Study Implications:** The section addresses the *practical* consequences of the study's results—that is, what practitioners (e.g., therapists, health care workers, policy makers) may take away from the research in order to improve practice or create beneficial social change.

\_\_\_\_\_ **Limitations:** The section provides a thoughtful reflection on the *limitations* of the study by indicating what methodological trade-offs were made in designing the research and the implications of those trade-offs.

\_\_\_\_\_ **Future Research:** The section provides prescriptions for *future research*. To identify avenues for future research, you may want to consider what questions your study has raised, what remains unanswered or unclear, and what you are curious about now. Further, you may want to consider the following: Knowing what you know now, what might you do differently if you were to design the study now?

**Discussion Chapter (Five).** Chapter five will consist of a global discussion intended to integrate the articles presented in the thesis. The section should relate the findings/assertions of the individual manuscripts back to the global unifying themes of the thesis research.

**References.** Reference lists can either be done separately for each manuscript, or as a complete list at the end.

\_\_\_\_\_ **Pagination:** The reference list starts on its own page and has the heading References.

\_\_\_\_\_ **Format:** The references follow APA specifications.

\_\_\_\_\_ **Citations:** The list includes all works cited in the thesis.

\_\_\_\_\_ **References:** All items listed as references are cited in the paper.

## Appendices

\_\_\_\_\_ **Pagination:** Each appendix starts on its own page and is labeled. If there is only one appendix, it has the heading Appendix. If there is more than one, each appendix is labeled with a letter (i.e., Appendix A, Appendix B, etc.).

\_\_\_\_\_ **Copies of Key Documents:** Appendices include additional information or documentation relevant to the research (e.g., psychological instruments used, interview schedules, a blank copy of an informed consent form, interview transcripts).

## Global Criteria

**Writing, APA Style, and Organization.** In addition to the elements described above, the thesis is evaluated on how well written it is and the degree to which the student follows APA style guidelines.

\_\_\_\_\_ **Writing Standard:** The document is written with a polished scholarly style.

\_\_\_\_\_ All sentences are grammatically correct.

\_\_\_\_\_ All paragraphs are self contained and focused on a single topic or point.

\_\_\_\_\_ The document's tone is appropriately formal.

\_\_\_\_\_ **Organization:** The manuscript is organized logically.

\_\_\_\_\_ All sentences follow each other logically.

\_\_\_\_\_ All paragraphs follow each other logically.

\_\_\_\_\_ Each section is limited to a single global concept.

\_\_\_\_\_ **Logical Flow:** The sections add up to an integrated "whole."

\_\_\_\_\_ Subheadings are used to identify the logic and movement of the document.

\_\_\_\_\_ Transitions between sections are smooth and coherent.

\_\_\_\_\_ **Quotations:** Excessive use of scholarly quotations is avoided (especially long quotes) because the student primarily relies on his or her own words to explain others' ideas.

\_\_\_\_\_ **Format:** Correct APA style is used throughout the manuscript.

\_\_\_\_\_ In-text citations are formatted correctly.

\_\_\_\_\_ Citations for paraphrased ideas are formatted correctly.

\_\_\_\_\_ Citations for short quotes are formatted correctly.

\_\_\_\_\_ Citations for long quotes are formatted correctly.

\_\_\_\_\_ Headings are formatted correctly.

**Scholarly Contribution Learning Outcomes.** Finally, the thesis is evaluated by the committee on its scholarly value. The four learning outcomes are as follows:

\_\_\_\_\_ **Congruency:** The thesis's research question, research design, data collection methods, data analysis methods, and interpretation of findings are congruent with one another

\_\_\_\_\_ **Contribution:** The thesis makes a significant contribution to the knowledge of the discipline.

\_\_\_\_\_ **Research Skill:** The thesis demonstrates the student's capacity to carry out independent research.

\_\_\_\_\_ **Publication:** The thesis contains material worthy of scholarly publication.

TEXAS TECH UNIVERSITY  
DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SCIENCES  
MFT PROGRAM

APPROVAL OF THESIS PROPOSAL

\_\_\_\_\_

Name

\_\_\_\_\_

Date

Title of thesis proposal:

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Committee Approval:

\_\_\_\_\_

Chair

\_\_\_\_\_

\_\_\_\_\_

xc: Student File

**SECTION XIII**  
**DOCTORAL DISSERTATION**

**TEXAS TECH UNIVERSITY  
DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES  
MFT PROGRAM**

**DOCTORAL DISSERTATION**

**I. Committee**

The student is responsible for forming his/her dissertation committee with the advice and consent of her/his Dissertation Advisor. The Dissertation Advisory Committee shall be composed of at least three members of the graduate faculty from within MFT and ADRS and at least one graduate faculty member outside MFT and ADRS (either within or outside of the college). The Dissertation Advisor (Chair) must be a member of the full-time MFT or ADRS graduate faculty. On all committees there must be at least one MFT faculty. For the dissertation, students should sign up for 9 credits of MFT 8000 under the major advisor and for 1 hour under each of the three committee members, for a total of 12 hours.

**II. Proposal**

The dissertation proposal is prepared in consultation with the advisor. Guidelines for the formatting of the dissertation should be obtained by the student from the Graduate School or the Texas Tech Bookstore. Guidelines for the content of the dissertation is on the document "Dissertation Components for TTU MFT Doctoral Students" which should be followed carefully. Because the TTU MFT program has adopted an "Article" dissertation format, students should consult with their advisor and dissertation committee about how the proposed study will be developed into a two or three article dissertation and the plan should be clearly articulated in the proposal. Students may also choose a "traditional" format dissertation.

When the advisor has approved the proposal, it is submitted to the other members of the committee, and a proposal meeting is scheduled. The committee **MUST** have a minimum of **two** weeks between the time they receive the proposal and time of the meeting. If the committee members do not receive the document within two weeks, the meeting must be rescheduled. If the committee approves the proposal, the student may proceed with the project; if the proposal is not approved during this meeting, the student will be asked to work with the committee in revising the document. When the proposal is approved, the student must fill out the "Approval of Dissertation Proposal Form" and acquire the signature of all committee members. The original completed form must then be turned into the MFT secretary. This form will be placed in the student's permanent file. Committee signatures on a proposal form are an important safeguard for the student and should be obtained prior to proceeding with the research. Once the proposal is approved, the appropriate human subject forms must be submitted and approved before data collection can begin. (See section on Human Subjects.)

### **III. Defense**

The student works with his/her advisor in preparing the final document. When the advisor has approved the document, copies are submitted to each member of the committee. The committee members **MUST** have at least **two** weeks to review the document and make suggestions. At this stage, the student may spend several months working with committee members. When all committee members have agreed that the dissertation/thesis is ready to defend, the defense may be scheduled. Because of Graduate School deadlines, the committee approval must be obtained at least **three** weeks prior to the scheduled defense. The student is responsible for meeting the deadlines of the Graduate School for scheduling of the defense. Prior to the defense, the student should fill out the "Approval of Dissertation" form to be signed by committee members upon approval of the final dissertation. The original signed copy of the final approval of the dissertation must be turned in to the MFT Secretary to be placed in the student's permanent file. Students must provide a bound copy of the final dissertation document to each committee member and to the department.

**ORAL DEFENSE FOR THE DISSERTATION**  
**List of Major Steps as Required by the Graduate School**

The Semester you plan to Graduate, do the following FIRST.

1. File your "Statement of Intention to Graduate" with official title of dissertation listed with the Graduate Dean.
2. Pay your Dissertation Fee at Student Business Services.
3. As is the case with every other semester, be sure that you are enrolled for dissertation hours with each committee member (12 hours, or 9 hours if you hold a half-time assistantship).

After Completing your Dissertation Draft

At least FIVE WEEKS before you plan to defend:

1. After first obtaining approval from your advisor, circulate copies of your draft to the other members of your advisory committee.
2. Allow two weeks for your committee to review your draft. During the second week, your committee should have feedback concerning your draft.
3. You may set the date for the defense ONLY after having the approval of all members of the advisory committee to do so.

Setting your Dissertation Defense Date

At least THREE WEEKS before you plan to defend:

1. Set a time and day for the defense. The MFT faculty generally require that dissertation defenses be scheduled for Friday afternoon to allow all faculty and students possible to attend (12-2, 1-3, 2-4, or 3-5). Exceptions must be approved by the Program Director.
2. The student and faculty should work together to assure that faculty are available to review written documents according to the policy stated here. (Sometimes faculty have out-of-town professional obligations).
3. Reserve a room for your defense. The MFT Secretary can help you with this or you may make reservations through the Dean's office. The examination is a formal public affair, and should be scheduled in a room conducive to general attendance by faculty members and students.
4. Write your defense announcement and obtain approval from your advisor. Take one (1) copy to the MFT Secretary for posting.
5. Obtain the "Dissertation Packet" containing your title page from the Graduate School.
6. Submit your signed notification form and UMI abstract.

7. Suggest a Dean's representative to the Graduate School. Provide a copy of the dissertation to this representative.

#### After Your Defense

1. Submit three copies of the dissertation and two copies of the abstract to the Graduate School. Provide a bound departmental copy and bound copies to your committee members.
2. Articles based upon the dissertation should be written and submitted. Except under extraordinary circumstances, the student is first author and the advisor is second author on the main article to come from the dissertation research. Authorship follows APA guidelines.

## Dissertation Components for TTU MFT Doctoral Students

*Adapted from guidelines from the Santa Barbara Graduate Institute and the book "How to prepare a dissertation proposal" by Krathwohl and Smith (2005).*

The rubric on the following pages is meant to help PhD students understand what constitutes a quality dissertation in the MFT program at TTU. The dissertation is a key component of meeting our student learning outcomes. Specifically, the dissertation will demonstrate proficiency in the candidate's ability to conduct original research in the profession. See also Chapter 2 of the APA *Sixth* Edition Publication Manual for components and examples of research manuscripts.

Students should see TTU's guidelines for formatting and submitting dissertations for additional technical information. It is also helpful to review other completed dissertations to see their formatting and content. In regard to components, there is some flexibility, especially for qualitative studies, which may deviate from the format below in presentation of results. However, in general students will do well to follow carefully these guidelines.

The TTU MFT Program has adopted an "article" format for the dissertation. The advantages of this include an accelerated transition to publishing one's work, and a quicker move into building a research program. In the article dissertation format, the middle chapters are formatted as stand-alone works that will be ready for submission. Students will work with their advisor and committee to determine if two or three articles are appropriate for the dissertation. A minimum of two articles must be empirical. If, in collaboration with the chair and the committee, the student decides to include a third article, it may be conceptual in nature or a traditional narrative review of the literature. This dissertation will also require introductory and concluding chapters that are substantive, and the articles need to be integrated by a theme.

Although some overlap or building upon the student's previous independent work is acceptable (e.g., there may be similar areas of literature review in the articles), self-plagiarism is not. Students must be first author on all articles, and other students should not be co-authors. The chair or other committee members may be authors on some or all of the eventual submissions.

In consultation with the dissertation chair and committee, students may decide to complete a "traditional" dissertation. The traditional format usually consists of the elements described below, arranged in five chapters: Introduction, Literature Review, Methods, Results, and Discussion. Variations on the traditional format may be warranted by the study design (e.g. qualitative study) and approved by the dissertation committee.

## Title Page

\_\_\_\_\_ **Layout:** The student has precisely followed the title page layout requirements that are stipulated in the TTU dissertation guidelines.

\_\_\_\_\_ **Title:** The title is succinct and descriptive of the research. If a quantitative study is proposed, the title includes the primary independent and dependent variables (e.g., The Impact of Structural Family Therapy on Generalized Anxiety Disorder).

**Other Dissertation Pages.** These will consist of pages as designated by the TTU formatting guidelines (e.g., signature pages).

**Abstract.** The abstract is a short overview of the proposed research. It should include the following items.

\_\_\_\_\_ **Pagination:** The abstract starts on a new page.

\_\_\_\_\_ **Word count:** The abstract does not exceed 250 words.

\_\_\_\_\_ **Tense:** The abstract is written in the past tense (except for the proposal abstract).

\_\_\_\_\_ **Content:** The abstract summarizes the study:

\_\_\_\_\_ The abstract indicates what the dissertation's research questions (if a qualitative or mixed-methods study) or hypotheses (if a quantitative or mixed-methods study) were.

\_\_\_\_\_ The abstract describes the participants (e.g., "30 post-menopausal women in their 40s who suffer from clinical depression and live in the Denver area").

\_\_\_\_\_ The abstract summarizes what methods were used to collect and analyze the data.

\_\_\_\_\_ The abstract summarizes the study's key findings.

\_\_\_\_\_ **Clarity:** The abstract is readable, coherent, well-organized, concise, and self-contained.

\_\_\_\_\_ **Key words:** Because the abstract is often indexed in research databases, the student may wish to embed key words in it so that researchers searching computerized databases can access it easily.

## Table of Contents (TOC)

- \_\_\_\_\_ **Pagination:** The TOC starts on its own page and is labeled Table of Contents.
- \_\_\_\_\_ **Headings:** The TOC lists all of the headings and subheadings that appear in the dissertation with their accompanying page numbers which are printed with a dot leader and are justified flush right.
- \_\_\_\_\_ **Heading Structure:** The TOC shows that the hierarchical organization of headings and subheadings in the manuscript is correct. That is, the manuscript does not have any instances of a single subheading within a section. This is shown in the TOC by there being at least two entries of the same level below any entry of a higher level. (If there is only one entry below an entry of a higher level, the student has not structured the sections and subsections of the manuscript correctly and needs to fix this in the body of the document.)

**Introductory Chapter (One).** The introduction needs to address each of the elements stipulated below (except where otherwise noted). The order in which the student incorporates the elements is up to his or her discretion, provided that there is a logical flow. The aim of the introduction is to provide an overview of the study and to engage the reader by why this research is interesting, important, and necessary.

- \_\_\_\_\_ **Pagination:** Like all chapters in the dissertation, the introduction starts on the top of a new page.
- \_\_\_\_\_ **Headings:** The introduction, like all chapters in the dissertation, is divided into meaningful subsections each with its own heading. (The only exception to this is that the very first section of the introduction should NOT have any heading.)
- \_\_\_\_\_ **Study Focus:** The introduction elucidates what the focus of the study is. The topic should be focused but not trivial.
- \_\_\_\_\_ **Study Importance:** The introduction explains why the focus of the research is a significant problem worthy of study. Specifically, it draws on the literature to provide a brief, well articulated, and engaging argument for the need for the research. (Please bear in mind that the fact that something has not been studied before is not a sufficient argument for why it should be studied. Also, it is generally preferable to study a topic that is important in its own right and not just a narrow issue about the MFT profession. For example, clinical research on a juvenile anxiety is preferred to just studying MFT supervisor stressors).
- \_\_\_\_\_ **Inquiry Framework:** The introduction clarifies what theoretical issue(s) the research will draw upon or illuminate. The dissertation research needs to be driven by, grounded in, and make a contribution to theory.

\_\_\_\_\_ **Terms:** If technical or other specialized terms are used (e.g., psychological or family systems concepts), it is helpful to have a section defining them (by drawing on the literature, NOT the dictionary). This is often done in a subsection at the end of this chapter.

\_\_\_\_\_ **Inquirer's stake:** The introduction may (but is not required to) include a *brief* discussion on what the author's personal stake is in the research, that is, why this project is personally meaningful to him or her. This is particularly relevant for qualitative work.

\_\_\_\_\_ **Study Boundaries:** Statement of study boundaries, presuppositions, trade-offs, and limitations, including what the study will not do.

\_\_\_\_\_ **Summary:** By the end of the introductory chapter, the reader knows what the author studied (or is proposing to study). This is usually established by a Purpose of Study subheading that lists the research questions and/or hypotheses. Sometimes these complete hypotheses are placed at the end of the Literature Review chapter. If so, give a shorter version here and a more thorough version there.

\_\_\_\_\_ **Inquiry Statement(s):** (For quantitative and mixed-methods studies): The hypotheses are clearly stated by indicating what the study's variables are and what the proposed the relationship is between or among them (e.g., I hypothesize a negative correlation between developmental trauma and capacity for intimacy).

\_\_\_\_\_ **Inquiry Clarity:** The research questions and/or hypotheses make clear sense in light of the introduction.

**Review of the Literature or Manuscript #1 Chapter(s) (Two).** The literature review places the study in the context of previous research. As noted in the *Publication Manual of the American Psychological Association* (6<sup>th</sup> ed.), a scholarly review of earlier work provides an appropriate history and recognizes the priority of the work of others. Citation of and specific credit to relevant earlier works is part of the author's scientific and scholarly responsibility (2009). Students who choose a two article format will include a traditional literature review as the second chapter. For student who choose a three article dissertation, Chapter 2 will be a modified lit review that can likely be submitted as a stand-alone article (conceptual, theoretical, or position paper).

\_\_\_\_\_ **Structure:** The literature review is broken into subsections, each with its own heading. These usually correspond to the organization of the research questions/hypotheses.

\_\_\_\_\_ **Sections:** The subsections are ordered in a logical fashion and have a clear relationship to each other (rather than reading as discreet, disconnected blocks of text).

\_\_\_\_\_ **Justification:** The literature review, like the introduction, draws on select literature to *build a case* for why this particular study needs to be conducted.

\_\_\_\_\_ **Selection Process:** The review focuses only on literature *directly pertinent* to the problem addressed in the research (e.g., is attached to the research questions/hypotheses). Chosen based on assessment of scope, relevance, and methodological quality of literature reviewed.

\_\_\_\_\_ **Major Works:** The research discussed in the literature review is drawn from recent peer-reviewed journals (refereed journals), dissertations, and books published by university presses (e.g., Univ. of Washington Press) or academic publishers (e.g., Sage, Routledge, Oxford). The balance weighs most heavily on journals because this is where the most up-to-date empirical findings are published. Secondary source citations are avoided where possible (e.g., According to Smith, Minuchin argued that . . .).

\_\_\_\_\_ **Implications:** Summary of implications from the literature review (including theoretical positions and their support, empirical evidence, policy statements, and practical knowledge and experience) for (a) understanding the phenomena of interest, and (b) studying the phenomena of interest.

\_\_\_\_\_ **Quality:** The literature review is interesting: it tells a story, rather than reads like a laundry list of previous research. Do not just review previous works, but organize literature conceptually.

\_\_\_\_\_ **Summary:** Summary of literature review and transition to Method Statement.

**Empirical Manuscripts or Methods and Results Chapters (Three and Four).** Chapters three and four will consist of completed individual manuscripts ready for submission to a scholarly journal with significance in the profession of MFT. In addition to the elements of the introduction and literature review, the manuscripts will contain well developed methods, results, and discussion sections:

#### Theoretical and Epistemological Influences and Research Design

\_\_\_\_\_ **Cohesion:** The methodology should connect to the questions asked, and should also indicate the researcher's theoretical and epistemological assumptions about the knowledge being proposed and generated.

\_\_\_\_\_ **Methodological Orientation:** (For qualitative or mixed-methods studies.) The student indicates in which qualitative paradigm the study was grounded (e.g., phenomenology, grounded theory, feminist, ethnography) and why. (In addition to the student's theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of qualitative paradigm.)

\_\_\_\_\_ **Methodological Findings:** This section cites literature to support the use of the above design or orientation. (Optional: Other designs or orientations the student considered but rejected are discussed and why he or she determined these would be less effective is explained.)

\_\_\_\_\_ **Research Design:** (For quantitative or mixed-methods studies.) The student indicates what research design he or she used—that is, what his or her logic of your inquiry was (e.g., experimental, quasi-experimental, comparative case study, cross sectional, longitudinal) and why. (In addition to the student’s theoretical justification, he or she is invited to note any personal, political and/or epistemological rationales for his or her choice of design.)

### Participants and Sampling

\_\_\_\_\_ **Participants:** The student describes who he or she studied—that is, who his or her participants were— and indicates why. All characteristics of the sample that are relevant to the study are specified.

\_\_\_\_\_ **Selection Process:** The student indicates the method he or she used to select participants (e.g., purposive sampling, random sampling, convenience sampling, snowball sampling) and why he or she used this method.

\_\_\_\_\_ **Recruitment:** The student indicates how he or she gained access to participants (e.g., through a professional organization’s mailing list, posters advertising the study).

\_\_\_\_\_ **Sample Size:** The student indicates how many people participated in the study and provides a rationale for his or her sample size (whether large or small).

\_\_\_\_\_ **Support of Selection:** This section cites literature to support the use of the above participant selection methods.

### Data Collection

#### Data Collection Method

\_\_\_\_\_ The student indicates what data collection method(s) he or she used (e.g., interviews, diaries, psychological tests, participant observation, archival research) and why.

#### Measures. (For quantitative or mixed methods studies.)

\_\_\_\_\_ The student indicates the quality of the measure (e.g., reliability, validity)

\_\_\_\_\_ The student indicates how he measured the predictor (independent) and outcome (dependent) variables.

\_\_\_\_\_ The student explains why he or she chose these specific operational measures if this has not been explained earlier and the rationale for their use is not self evident.

\_\_\_\_\_ The student indicates which research instruments (e.g., specific psychological tests), if any, were used. (The student provides citations for the instruments and includes them in the appendices).

\_\_\_\_\_ This section cites literature to support the use of the above measures.

Data Collection Procedures. (Required for experiments, otherwise optional.) Students who employed an experimental design need to describe in precise detail how the experiment was conducted. Those who conducted qualitative research or used a quantitative design other than an experiment may opt to include a data collection procedures section if the data collection methods section does not clarify all of the steps that were undertaken to gather the data.

\_\_\_\_\_ The student indicates all of the steps that were undertaken to conduct the experiment/collect the data.

\_\_\_\_\_ (For experiments): The procedures section is sufficiently detailed to allow another researcher to replicate the experiment.

#### Data Analysis Methods.

\_\_\_\_\_ **Analysis:** The student describes methods (e.g., constructivist grounded theory analysis of interviews, examination of field notes, structural equation modeling, dyadic data analysis) and procedures he or she undertook to analyze the data and indicates why he or she employed these methods and procedures.

#### Ethical Protection of Participants

\_\_\_\_\_ **Implications:** The student provides a meaningful reflection on the ethical implications of his or her study.

\_\_\_\_\_ **Anticipated Risk:** The student assesses what the level of risk (physical and psychological) was for those who participated in the study and states how he or she minimized this risk if its level was moderate to high.

## Results

For quantitative studies:

- \_\_\_\_\_ **Structure:** The results section is structured around the hypotheses.
- \_\_\_\_\_ **Components:** For each hypothesis, the student provides the following information:
  - \_\_\_\_\_ The hypothesis
  - \_\_\_\_\_ The data analysis method used to test it (e.g., a Student's t-test, ANOVA)
  - \_\_\_\_\_ The outcome of the analysis (e.g., At  $p < .05$ , the analysis supports [or fails to support] the hypothesis that....), including the relevant statistics (e.g., the  $t$ -statistic, the  $p$ -value).
- \_\_\_\_\_ **Table content:** Tables and figures are self-descriptive and informative.
- \_\_\_\_\_ **Table relation:** The tables and figures are clearly related to the narrative in the chapter.

For qualitative studies:

- \_\_\_\_\_ **Structure:** The results section is structured around the research questions. Each question may be examined in its own section of the results.
- \_\_\_\_\_ **Supporting Themes:** Patterns, relationships, and themes reported as findings are supported by appropriate and sufficient evidence that is included in the body of the section. Additional evidence should be included in appendices (e.g., sample transcripts, researcher logs, field notes/memos, etc.).
- \_\_\_\_\_ **Reporting Data:** The section reports on all salient findings, including (and especially) discrepant cases and disconfirming data.

Discussion. The discussion section is where the student explains what they believe their findings mean and why their findings matter. In addition, limitations of the study are discussed as are recommendations for future research.

- \_\_\_\_\_ **Overview:** The discussion section begins with an *overview* of the results, which are summarized, evaluated, and interpreted with respect to the original research questions and/or hypotheses. (A table may be used to organize the findings.)
- \_\_\_\_\_ **Study Contributions:** The section addresses how the study contributes to scientific knowledge in the student's area of interest. More specifically, the section addresses the *theoretical* consequences of the study's results, that is, how the findings inform one or more specific bodies of theory.

\_\_\_\_\_ **Study Implications:** The section addresses the *practical* consequences of the study's results—that is, what practitioners (e.g., therapists, health care workers, policy makers) may take away from the research in order to improve practice or create beneficial social change.

\_\_\_\_\_ **Limitations:** The section provides a thoughtful reflection on the *limitations* of the study by indicating what methodological trade-offs were made in designing the research and the implications of those trade-offs.

\_\_\_\_\_ **Future Research:** The section provides prescriptions for *future research*. To identify avenues for future research, you may want to consider what questions your study has raised, what remains unanswered or unclear, and what you are curious about now. Further, you may want to consider the following: Knowing what you know now, what might you do differently if you were to design the study now?

**Discussion Chapter (Five).** Chapter five will consist of a global discussion intended to integrate the articles presented in the dissertation. The section should relate the findings/assertions of the individual manuscripts back to the global unifying themes of the dissertation research.

**References.** Reference lists can either be done separately for each manuscript, or as a complete list at the end.

\_\_\_\_\_ **Pagination:** The reference list starts on its own page and has the heading References.

\_\_\_\_\_ **Format:** The references follow APA specifications.

\_\_\_\_\_ **Citations:** The list includes all works cited in the dissertation.

\_\_\_\_\_ **References:** All items listed as references are cited in the paper.

## **Appendices**

\_\_\_\_\_ **Pagination:** Each appendix starts on its own page and is labeled. If there is only one appendix, it has the heading Appendix. If there is more than one, each appendix is labeled with a letter (i.e., Appendix A, Appendix B, etc.).

\_\_\_\_\_ **Copies of Key Documents:** Appendices include additional information or documentation relevant to the research (e.g., psychological instruments used, interview schedules, a blank copy of an informed consent form, interview transcripts).

## Global Criteria

**Writing, APA Style, and Organization.** In addition to the elements described above, the dissertation is evaluated on how well written it is and the degree to which the student follows APA style guidelines.

\_\_\_\_\_ **Writing Standard:** The document is written with a polished scholarly style.

\_\_\_\_\_ All sentences are grammatically correct.

\_\_\_\_\_ All paragraphs are self contained and focused on a single topic or point.

\_\_\_\_\_ The document's tone is appropriately formal.

\_\_\_\_\_ **Organization:** The manuscript is organized logically.

\_\_\_\_\_ All sentences follow each other logically.

\_\_\_\_\_ All paragraphs follow each other logically.

\_\_\_\_\_ Each section is limited to a single global concept.

\_\_\_\_\_ **Logical Flow:** The sections add up to an integrated "whole."

\_\_\_\_\_ Subheadings are used to identify the logic and movement of the document.

\_\_\_\_\_ Transitions between sections are smooth and coherent.

\_\_\_\_\_ **Quotations:** Excessive use of scholarly quotations is avoided (especially long quotes) because the student primarily relies on his or her own words to explain others' ideas.

\_\_\_\_\_ **Format:** Correct APA style is used throughout the manuscript.

\_\_\_\_\_ In-text citations are formatted correctly.

\_\_\_\_\_ Citations for paraphrased ideas are formatted correctly.

\_\_\_\_\_ Citations for short quotes are formatted correctly.

\_\_\_\_\_ Citations for long quotes are formatted correctly.

\_\_\_\_\_ Headings are formatted correctly.

**Scholarly Contribution Learning Outcomes.** Finally, the dissertation is evaluated by the committee on its scholarly value. The four learning outcomes are as follows:

- \_\_\_\_\_ **Congruency:** The dissertation’s research question, research design, data collection methods, data analysis methods, and interpretation of findings are congruent with one another
- \_\_\_\_\_ **Contribution:** The dissertation makes a significant contribution to the knowledge of the discipline.
- \_\_\_\_\_ **Research Skill:** The dissertation demonstrates the student’s capacity to carry out independent research.
- \_\_\_\_\_ **Publication:** The dissertation contains material worthy of scholarly publication.

*Comparison of Dissertation Components*

<b>Traditional (5 Chapter) Dissertation</b>	<b>Three Journal Article Dissertation</b>
Preliminary Materials (Title, abstract, Acknowledgments, Table of Contents. Etc)	Preliminary Materials (Title, abstract, Acknowledgments, Table of Contents. Etc)
Chapter 1 – Introduction	Chapter 1 – Introduction
Chapter 2 – Literature Review	Chapter 2 – Manuscript #1 (may be conceptual)
Chapter 3 – Methods	Chapter 3 – Manuscript #2
Chapter 4 - Results	Chapter 4 – Manuscript #3
Chapter 5 – Discussion / Conclusion	Chapter 5 – Discussion / Conclusion
References	References
Appendices	Appendices (may include extended literature review, theory development, or extended results)

TEXAS TECH UNIVERSITY  
DEPARTMENT OF COMMUNITY, FAMILY, AND ADDICTION SERVICES  
MFT PROGRAM

APPROVAL OF DISSERTATION PROPOSAL

\_\_\_\_\_  
Name

\_\_\_\_\_  
Date

Title of dissertation proposal:

\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Committee Approval:

\_\_\_\_\_  
Chair

\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
\_\_\_\_\_

xc: Student File

**SECTION XIV**  
**ANNUAL REVIEW**

**DEPARTMENT OF APPLIED AND PROFESSIONAL STUDIES  
MARRIAGE AND FAMILY THERAPY PROGRAM**

**FACULTY EVALUATION FORM**

Student's Name \_\_\_\_\_ Date \_\_\_\_\_

Faculty Member \_\_\_\_\_

Capacity in which faculty member has known you:

Course # \_\_\_\_\_  
Research Assistant \_\_\_\_\_  
Teaching Assistant \_\_\_\_\_

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

\_\_\_\_\_  
Signature \_\_\_\_\_ Date \_\_\_\_\_

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

**RATING**

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

**COMMENTS**

\_\_\_\_\_  
Faculty Signature \_\_\_\_\_ Date \_\_\_\_\_

\*\*Return Directly to the MFT Program director

**SECTION XV**

**AAMFT MEMBERSHIP**

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

It is also expected that students will be active in the TTU SAMFT student organization of AAMFT here.

**SECTION XVI**

**LICENSURE**

## WHERE CAN I GO WITH MY DEGREE AND LICENSE?

### **MS Degree**

The TTU CMFT Master's Degree Program is not currently accredited by the COAMFTE. However, Texas Tech University is accredited by the Southern Association of Colleges and Schools Commission on Colleges. Your degree is nationally recognized and accepted, and once you complete the degree, you may identify yourself as having completed a Master's of Science Degree (John Doe, M.S.).

If you are interested in doctoral studies, your MS degree should transfer credits toward a doctoral degree dependent on the field of study you pursue. If you are interested in pursuing a doctoral degree from a COAMFTE accredited doctoral program, your MS degree is designed to meet the Foundational Curriculum requirements set forth in Version 12 of the COAMFTE accreditation standards and required as part of earning a doctoral degree from an accredited program.

The TTU CMFT MS degree is designed to meet the licensure requirements for the LMFTA license in Texas. Some states, not Texas, continue to allow graduates of accredited master's degree programs to forgo supplying specific curriculum/course information as part of the licensure process. However, due to changes accreditation standards, many states require complete transcripts and evidence of course content for licensure regardless of accreditation status. Because licensure is regulated by individual states, it is possible that a state other than Texas may have additional requirements not provided as part of the standard CMFT curriculum at Texas Tech. Students considering pursuing licensure in other states are strongly encouraged to consult with their advisor and visit the licensure board for the state of interest. Some resource that may be helpful are provided in the resource section of this document.

Students enrolled in the TTU CMFT master's degree program are strongly encouraged to take the national licensure exam during the final semester of study (even if you plan to seek licensure in another state) and apply for the LMFTA (associates license) as soon as the degree is conferred.

### **PhD Degree**

The TTU CMFT Doctoral Program is accredited by COAMFTE and Texas Tech University is accredited by the Southern Association of Colleges and Schools Commission on Colleges. As such, your PhD is nationally recognized and once you complete the degree, you may identify yourself as a doctor of philosophy (Jane Doe, PhD).

Because all graduates of the TTU CMFT doctoral program must have also completed the Foundational Curriculum through an accredited master's degree program, by leveling any course deficits through the TTU CMFT master's degree program, or by earning a master's degree from a program meeting the requirements of the Foundational Curriculum, the doctoral degree can be used as the terminal degree for licensure in Texas. Because licensure is regulated by individual states, it is possible that a state other than Texas may have additional

requirements not provided as part of the standard CMFT curriculum at Texas Tech. Be aware that if you are using the doctoral degree as the terminal degree for licensure, you will not be able to count the clinical hours you earn during the doctoral program towards licensure in Texas. Other state regulations may vary. Students considering pursuing licensure in other states are strongly encouraged to consult with their advisor and visit the licensure board for the state of interest. Some resource that may be helpful are provided in the resource section of this document.

Students with a qualifying master's degree are strongly encouraged to apply for associate licensure in Texas during the first semester of study if they have not already earned associate or full licensure in Texas or another state. Having a LMFTA or LMFT will improve your prospects for internships and your viability on the academic job market. Students entering the doctoral program without a qualifying degree for licensure are strongly encouraged to seek associate licensure as soon as they are eligible.

## RESOURCES

AAMFT link to state licensure boards

[http://www.aamft.org/iMIS15/AAMFT/Content/Directories/MFT\\_Licensing\\_Boards.aspx?hkey=2f66f29c-ca16-4a58-8fff-30d176311f87](http://www.aamft.org/iMIS15/AAMFT/Content/Directories/MFT_Licensing_Boards.aspx?hkey=2f66f29c-ca16-4a58-8fff-30d176311f87)

Third Party Aggregator of MFT Licensure Requirements – THIS IS A VERY USEFUL SITE!

<http://www.mft-license.com/>

## MFT LICENSURE IN TEXAS

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

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

The appropriate forms are available on-line at <http://www.dshs.state.tx.us/mft> . For the supervision report, ask the Clinic Coordinator for a summary of contact and supervision hours, complete the form, attach the relevant computer printout and give to the MFT Program Director for verification and signature. For hours earned outside the program, send another supervision form to each of your old supervisors. The hours "in the computer" are our official records. As always, it is your responsibility to make sure they are accurate and up-to-date. The

Clinic Director must approve any changes. The MFT secretary is a notary and can witness your forms. A model “Supervisory Agreement Form” is included in your Program Manual.

<b>Comparison of Requirements for MFT Credentials</b>			
QUALIFYING DEGREE	MASTERS IN MFT (Accredited Program)	MASTERS IN OTHER MENTAL HEALTH PROFESSION	NON-QUALIFYING MASTERS DEGREE
NUMBER OF CONTACT HOURS AT START OF PHD	500	0 – 500	0
WHEN TO APPLY FOR TEXAS ASSOCIATE LICENSE	During the last semester of master’s study  At entry to Ph.D. Program	When complete Master's equivalent MFT coursework + Practicum	At completion of Ph.D. degree
PRACTICUM CONTACT HOURS IN PROGRAM	MS – 500  PhD - 250	500	500
WHEN TO APPLY FOR SUPERVISOR INTENT TO TRAIN	At entry into Ph.D. Program	At completion of 500 hours in Ph.D. Program	At completion of 500 hours in Ph.D. Program
REQUIRED CONTACT HOURS IN INTERNSHIP	N/A	500	500
WHEN TO APPLY FOR AAMFT CLINICAL MEMBERSHIP	Upon receipt of LMFT licensure	Upon receipt of LMFT licensure	Upon receipt of LMFT licensure
WHEN TO APPLY FOR TEXAS FULL LICENSURE	Two years post masters + 1500 direct & 1500 indirect + exam	Two years post masters + 1500 direct & 1500 indirect + exam	Two years post Ph.D. + 1500 direct & 1500 indirect + exam
WHEN TO APPLY FOR LICENSURE IN OTHER STATES	[Issue here is whether other states will take clinical membership or must document hours past the qualifying degree]		
WHEN TO APPLY FOR APPROVED SUPERVISOR			
MINIMUM HOURS TO TEXAS LICENSURE	1500	1500	2000

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

**SECTION XVII**  
**HUMAN SUBJECT RESEARCH**

## HUMAN RESEARCH PROTECTION PROGRAM

All research involving human subjects, whether led by faculty or independently pursued by students is governed by the Human Research Protection Program (HRPP) and the Institutional Review Board. All students must be familiar with and follow the requirements for proposal submission and reporting established by the HRPP, BEFORE starting any research that involves human subjects or data collected from human subjects. It is expected that you will work in conjunction with faculty to ensure that you are following appropriate HRPP protocols. The policies and procedures for human subject research are available at:

<http://www.depts.ttu.edu/vpr/irb/policies.php>

**SECTION XVIII**  
**PROGRAM GOVERNANCE**

## **TTU CMFT Graduate Programs Program Governance**

The faculty of the CMFT Graduate Programs are dedicated to a model of program governance that is collaborative where possible and honors the voices of all the program faculty and students. In almost all cases, decisions about program governance are made through program faculty consensus, with input from students and stakeholders.

**Program Director:** The CMFT Program Director is the facilitative lead for the CMFT graduate programs and one point of contact for program, clinical, or faculty related concerns. If you have a concern or suggestion, you can always bring it to the program director directly. The Program Director is on duty 12 months a year. The responsibilities of the program director include:

### *Academic Program Director*

- Coordinate weekly faculty meetings addressing issues relative to the MFT program
- Coordinate admissions process for doctoral and master's applicants to the graduate programs
- Receive and distribute messages to students and faculty related to position openings, internships, training opportunities and other pressing matters
- Meet with students from both Master's and Doctoral programs to address and resolve issues related to program of study, cohort concerns, qualifying exams
- Coordinate the grading of qualifying examinations/portfolios.
- Field regular inquiries from prospective graduate students and position applicants (national and international)
- Coordinate management transition issues related to faculty and staff turnover
- Meet with all MFT graduate students to coordinate their programs of study, committee formation, internships, and graduation plans
- Coordinate regular review of program data, resources, and teaching/learning practices.

### *Department, College and University Interaction*

- Liaison with the CFAS Department Chair
  - Assist with Annual Faculty Reviews
  - Meet as member of the Executive Committee (2x monthly)
- Serve as MFT liaison with College and Graduate School
- Respond to immediate needs from Department, College or University
- Works with department chair and CFAS coordinator to manage undergraduate degree

### *National and State Interaction*

- Participate in AAMFT program director's listserve
- Attend the MFT Doctoral Educator's Summit.

- Lead national and state representation at conferences (including research meetings for Texas association of MFT, program director's meetings at AAMFT, etc.)

### Accreditation

- Coordinate continual accreditation of MFT doctoral program
- Correspond with Commission on Accreditation for Marriage and Family Therapy Education (COAMFTE) to address ongoing issues related to changes and concerns
- Coordinate submission of annual reports and reaccreditation site visits
- Coordinate the response to accreditation concerns with program functioning
- Coordinate the preparation and submission of annual reports and the Self Study.

### Business Management

- Supervise and work with the Lead Processor – MFT Staff for the following:
  - Coordinate all course content and sequencing
  - Coordinate recruitment, admissions, and retention efforts
  - Maintain the program web page.
  - Coordinate the tracking of accreditation related data.

### Family Therapy Clinic (FTC)

- Coordinate with the Clinic Director in the following responsibilities:
  - Coordinate Clinic data base and research projects (including IRB renewal)
  - Manage clinic finances
  - Coordinate supervision of graduate and undergraduate students in the clinic
  - Maintain Clinic data base and address issues related to service delivery
  - Update and enforce FTC policies and procedures manual
  - Coordinate community initiatives, (e.g., education groups, aftercare programs, internship placements) outreach, and networking.
  - Assists with clinic emergencies and client concerns
  - Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists
- Serve as co-director of the Center for Family Systems Research and Intervention.

**Clinic Director:** The CMFT Clinic director is the primary point of contact for issues related to clinic operation, clinical issues, and internship/externship issues. The Clinic Director works closely with the Program Director and all program Faculty to ensure the TTU Family Therapy Clinic functions to support the Program goals and SLOs. Responsibilities of the CMFT Clinic Director include:

## Clinical Director of the Family Therapy Clinic

### General Operations:

- Maintain FTC recording equipment and clinic facilities
- Update and maintain the FTC Policies & Procedures Manual
- Train incoming students on clinic policies and recording equipment
- Address student concerns when primary faculty supervisor is unavailable
- Maintain compliance with ethical and professional standards of care regarding client confidentiality, record keeping, and professional conduct of student therapists.

### Clinic Finances:

- Submit annual budget revisions (advertising, insurance, student travel, etc.)
- Track clinic income and expenditures
- Deposit clinic fees/process account transfers
- Manage billing for outside contracts (i.e., Aftercare)

### Staff Management:

#### Clinic Coordinator position

- Case assignment/intake scheduling
- Maintain MCSR database and syntax to track student hours
- Organize program special events
- Maintain client records/scanned files

#### Undergraduate HDFS/CFAS practicum students (~250hrs/semester)

Monitor therapy rooms/supplies and forms  
Room usage/scheduling documentation  
File scanning and storage  
Special projects as assigned

### Database Management:

- Maintain the Advanced MD software for client file management
- Maintain the clinical assessment/research database
  - Purchase software & measurement licenses/renewals
  - Write and maintain syntax to score assessments
  - Facilitate access to data for student and faculty research
  - Implement outcome based procedures/data collection

Internship Coordination:

Doctoral Internship Coordination

- Facilitate student documentation/enrollment
- Audit student files for current internship agreements and evaluations
- Visit internship sites periodically to elicit feedback from partners
- Foster relationships with future internship sites

Masters 'Externship' Placement Coordination

Facilitate student placements  
Process internship documentation  
Maintain contact with site/agency contact  
Provide clinical supervision as assigned

Clinic Development and Community Liaison:

- Public Relations/Marketing/Community outreach and networking
  - Participate in health fairs, campus resource events, and other community events
  - Update and coordinate outreach and placement of promotional materials
    - Distribute to referral sources and attend local organizational meetings
    - Assess and expand current and new referral sources
- Organize annual continuing education training events  
Generate contracts (corporate, service delivery grants)
  - Expand revenue generating sources

Instructor for CFAS/MFT

- Teach 2 courses per semester (teaching history listed below)
  - MFT 5300 (Fall 2016)
  - MFT 6395/Practicum (as needed)
  - CFAS 4380/Program Development & Evaluation (Fall 08-15)
  - MFT 7395/Doctoral Internship in MFT (year round)
  - MFT 6303/Couples/Sex Therapy (Spring semester, rotating years)
  - MFT 6342/Grief & Loss Seminar (Spring semester, rotating years)
  - MFT 7000/Research (as needed)

**Program Faculty:** The program faculty are expected to take active roles in the ongoing governance of the program. Although the Program Director and Clinical director have specific coordination roles, all the faculty have an equal voice in the governance of the program. Wherever possible, decisions about teaching/learning practices, curriculum, clinical training, supervision, hiring, admissions, allocation of resources, and student issues are made by consensus of the program faculty. Governance responsibilities of the program faculty include:

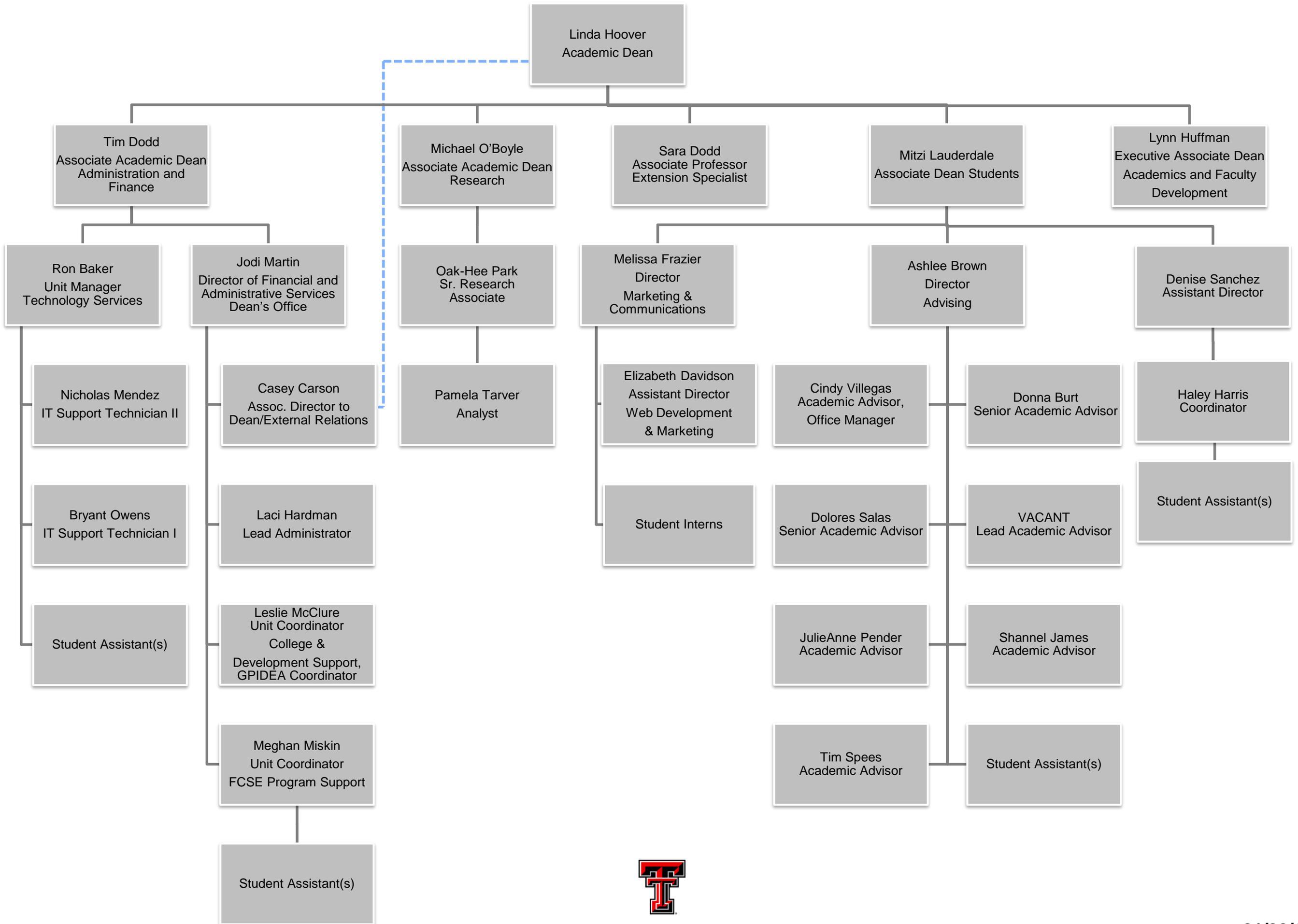
- Attend and participate in weekly CMFT faculty meetings.
- Participate in the review of application for admission, the interview for admissions process, and the selection of students for the program.
- Be available and open to hearing concerns or suggestions from students and communicating the concerns or suggestions to the program faculty as a whole.
- Participate in the grading of qualifying examinations/portfolios.
- Function as an advisor for student in the program.
- Participate in regular review of program goals, outcomes, resources, teaching/learning practices, and curriculum; be an active voice in shaping the direction of the program; and be willing to contribute actual work product (e.g. developing portfolio components, curriculum suggestions, drafting program policies and procedures, etc.)
- Participate in the production of annual reports and self-studies for accreditation.
- Participate in program level committees formed to address program governance, curriculum, accreditation, or other related issues.
- Function professionally in ways that support the programs goals related research, clinical training, supervision, teaching, diversity, and addiction sciences.

**Students:** We value the input of our students and want you to have an active role in the governance of the program. You are always welcome to discuss ideas or concerns with any of the program faculty and should expect them to be responsive. In addition to informal input, there are three formal mechanisms by which you can be directly involved in the governance of the program:

- Take the time to thoughtfully complete the Practicum Self Evaluations, Supervision Practicum Self-Evaluations, Program Exit Evaluation, and Alumni Survey. Your feedback is used to shape the program and to determine if we are meeting the program goals. We want to hear what you really think!
- Join the Student Association for Marriage and Family Therapy (SAMFT). The student organization helps coordinate student participation in interview days with potential students, student participation in the faculty hiring process, and program social gatherings. SAMFT, also, elect student representatives. The student representatives attend at least one faculty meeting a semester during which outcome data is reviewed and function to share ideas, suggestions, or concerns about the program with the program faculty.
- Offer honest, considered feedback during your annual review. All students participate in the annual review process in order to evaluate your progress in the program. However, the annual review is, also, intended as an opportunity for you to give feedback to program faculty about your experience in the program. We want to hear your ideas, concerns, and suggestions for how the program can be better. Some things we will ask about are whether the physical, technological, and instructional resources are sufficient for you to meet program goals. We will also ask about whether the teaching/learning practices and curriculum of the program are helping you to meet the program goals.

**Stakeholders:** We value the input of our stakeholders and want their input to influence the governance of the program. We maintain informal dialogue with all of our stakeholders and welcome their feedback and suggestions. In addition to informal feedback, a formal data collection process exists:

- Stakeholders are regularly asked to complete the Internship/Stakeholder Evaluation. The survey has two components. The first portion of the survey requests information on student intern/extern performance specifically related to program goals and SLOs. The second portion of the survey requests more general feedback about the program and the relationship between the program and the stakeholder. Data from the surveys is used as part of our assessment plan to evaluate program goals, curriculum, and teaching learning practices.



Department of Community, Family, and Addiction Services  
Dr. Sterling Shumway  
Chairperson

Robbie Vittitow  
Business Manager

DEPARTMENT EXECUTIVE COMMITTEE:  
Dr. Nichole Morelock-Associate  
Chairperson/CFAS Program Director  
Dr. Jaclyn Cravens -ADRS Program Director  
Dr. Doug Smith-MFT Program Director

Lori Minner  
Coordinator

FACULTY AND INSTRUCTORS  
David Ivey  
Doug Smith  
George Comiskey  
Jason Whiting  
Nichole Morelock  
Nicole Springer  
Sara Smock Jordan  
Sterling Shumway  
Tom Kimball  
Spencer Bradshaw  
Jaclyn Cravens  
Cynthia D'Sauza  
Kristy Soloski  
Eugene Wang  
Vacancy - T91114

Student Assistants

Graduate Assistants  
Graduate Part Time Teaching Instructor  
Research Assistant  
Teaching Assistant  
Post-Doc