Field Placement Application

All students considering applying for field placement need to apply for faculty approval prior to applying to any sites. The field placement supervisor announces the Field Placement application deadline via the CPYSTUD listserv. Applications are due Wednesday, January 11, 2023 by 11:59pm. Send completed applications to Dr. Meredith Van Tine at meredith.vantine@asu.edu. Criteria used in determining approval are: (a) adequate progress through the program, (b) completion of proposal for your thesis or thesis equivalency, and (c) clinical skill level.

Date: __________________________

Student’s Name: __________________________

Advisor: __________________________

Academic year for field placement: __________________________

Please note that your proposal for your thesis or thesis equivalency needs to be completed by February 1st of your second year in the CPY program in order for you to be allowed to go on field placement, starting the upcoming fall semester.

1. Progress on thesis/thesis equivalency
   a. Completion of thesis/thesis equivalency date: ________________ (if done go to item 2)
   b. Completion of thesis/thesis equivalency proposal date: ________________
   c. Status of thesis/thesis equivalency (writing proposal, gathering data, analyzing data, final write up)?
      ________________
   d. Projected thesis completion date:
      ________________

2. Other indicators of progress through the program
   a. Is this student in good academic standing--GPA > 3.00? (Yes/No) __________
   b. Any Incomplete grades? (Yes/No) _______ (if yes, please list courses) ________________
   c. Is this student on probation? (Yes/No) ________________
   d. Program of Study approved? (Yes/No) _______ (if not, please explain why) ________________
   e. Student has successfully completed doctoral practicum? (Yes/No) ________________

Advisor: I certify __________________________ will have successfully met all criteria needed for enrollment in CPY783 Field Placement.

______________________________

Signature of Advisor: __________________________ Date: ________________

01/05/2023