

COMPREHENSIVE PORTFOLIO CHECKLIST

Student: _____ ID: _____

Required Task 1: Conference Paper

- Acceptance letter from conference
- Page from conference program listing presentation
- Copy of paper

Date completed _____

Date approved by advisor/entered into portfolio _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Required Task 2: Research Manuscript

- Journal editor's acknowledgment of receipt
- Advisor's memo
- Copy of manuscript

Date completed _____

Date approved by advisor/entered into portfolio _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Required Task 3: Teaching

- Course evaluations
- Written feedback from faculty observer
- Copy of syllabus

Date completed _____

Date approved by advisor/entered into portfolio _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Two of the Following Five Tasks Required (must complete either option B or C) Optional Task A: Grant

___ Agency's acknowledgment of receipt

___ Advisor's memo

___ Copy of grant

Date completed: _____

Date approved by advisor/entered into portfolio: _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Optional Task B*: Supervision of Master's level student

___ Written feedback from supervision practicum instructor

___ Satisfactory grade in supervision practicum

Date completed _____

Date approved by advisor/entered into portfolio _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Optional Task C*: Case-Facilitator for CED 684

___ Written feedback from the internship course instructor

5-8 page paper

Date completed: _____

Date approved by advisor/entered into portfolio: _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

**Denotes either Optional Task B or C is required*

Optional Task D: Consultation

____ Written feedback from consultation supervisor

Copies of reports or materials developed (if any)

5-8 page paper

Date completed: _____

Date approved by advisor/entered into portfolio: _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Optional Task E: Professional Leadership or Advocacy

____ Letter from leadership/advocacy supervisor

Time log signed by leadership/advocacy supervisor

Date completed: _____

Date approved by advisor/entered into portfolio: _____

Committee Chair/Advisor's Signature: _____

Committee Member's Signature: _____

Committee Member's Signature: _____

Program of Study (iPOS) filed with the Graduate College

Date original filed with the Graduate College and copy entered into portfolio _____

COMPREHENSIVE PORTFOLIO COMPLETED

Committee Chair/Advisor's Signature: _____ Date: _____

Committee Member's Signature: _____ Date: _____

Committee Member's Signature: _____ Date: _____

Training Director's Signature: _____ Date: _____

Faculty Head's Signature: _____ Date: _____