

Appendix A1

**QUEEN'S UNIVERSITY DEPARTMENT OF PSYCHOLOGY
CLINICAL PRACTICUM APPLICATION FORM**

Name: _____ Date: _____

Year: _____ Number of Practicum Left to Complete: _____

Course Code: PSYC 838 PSYC 839 PSYC 989 PSYC 990 PSYC 991 PSYC 992 ELECTIVE

1. Clinical Training/Professional Development Goals for Placements:

2. Setting Priorities:

Please list, in order, your priorities for practicum placements. Please rank 4 12-week placements, or at least 2 24-week placements.

Note: All students will complete one of their first 2 practicum at the Psychology Clinic.

	Setting	Proposed Supervisor	Preferred Time Frame		Met with supervisor? Y/N
			12-week	24-week	
1.					
2.					
3.					
4.					

3. Additional Comments (e.g., information about previous practicum matches, timing of placements):

Please submit completed form to the Clinic Administrative Assistant. Please see Practicum Guidelines for more information about the use of this form and contact the Director of the Psychology Clinic if you would like to discuss this application.