## **Applicant Information**

Contact Information				
Street:		Phone Number:		
City:	Eugene	Email:		
State:	Oregon			
Zip:	97401			

## Summary of Doctoral Training

	STATUS	DATE COMPLETED OR EXPECTED	REQUIRED TO PARTICIPATE IN APPIC MATCH?	REQUIRED TO ATTENI IN INTERNSHIP?
Doctoral Program Information				
Did you complete your required academic coursework? (excluding dissertation and internship hours)	Expected	06/15/2021	No	Yes
Have you successfully completed your program's comprehensive/qualifying examination(s)?	Completed	10/11/2019	Yes	Yes
Master Thesis	N/A		No	No
What is the current status of your dissertatio	n/doctoral resea	rch project?		
Proposal Approved	Expected	10/30/2020	Yes	Yes
Data Collected	N/A		No	No
Data Analyzed	Expected	12/31/2020	No	No
Final Defense	Expected	06/11/2021	No	No

#### **Practicum Hours Information**

		Doctoral Hours		Те	erminal Master's Ho	urs
	INTERVENTION	ASSESSMENT	SUPERVISION	INTERVENTION	ASSESSMENT	SUPERVISION
Total Hours	767.5	483.5	536.5	0.0	0.0	0.0

#### **Anticipated Practicum Experience**

Number of Hours Anticipated 0

#### Description of Anticipated Practicum Experience

Program Sanctioned Hours: Substance Use and Recovery Specialist:

#### Doctoral Program Information - Contact Information for Academic DCT/TD :

First Name :	Ellen
Last Name :	McWhirter

Email Address :

ellenmcw@uoregon.edu

## **Terminal Master's**

Degree Of Terminal Master's: MA

If "Other", please specify: N/A

## Area Of Concentration For Terminal Master's Degree:

If "Other", please specify: N/A

## Intervention Experience

	Do	ctoral	Terminal Master's	
	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT INDIVIDUALS	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT INDIVIDUALS
Individual Therapy				
Older Adults (65+)	0.00	0	0.00	0
Adults (18-64)	188.50	37	0.00	0
Adolescents (13-17)	30.00	4	0.00	0
School-Age (6-12)	31.50	3	0.00	0
Pre-School Age (3-5)	2.00	1	0.00	0
Infants / Toddlers (0-2)	4.00	1	0.00	0
Career Counseling				
Adults	0.00	0	0.00	0
Adolescents (13-17)	0.00	0	0.00	0
	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT GROUPS	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT GROUPS
Group Counseling				
Adults	71.50	9	0.00	0
Adolescents (13-17)	0.00	0	0.00	0
Children (12 and under)	0.00	0	0.00	0
	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT FAMILIES	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT FAMILIES
Family Therapy				
	28.00	7	0.00	0

	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT COUPLES	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT COUPLES
Couples Therapy				
	0.00	0	0.00	0
	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT INDIVIDUALS	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT INDIVIDUALS
School Counseling Interventions				
Consultation	1.00	1	0.00	0
Direct Intervention	8.00	0	0.00	0
Other	5.00	1	0.00	0
If "Other", please specify Providing intervention through teacher a	nd parent support (indirect	intervention)		

	TOTAL HOURS	# OF DIFFERENT INDIVIDUALS	
Telephone Based Interventions			
	0.00	0	

## Please specify the types of telephone-based intervention services you provided along with the respective hours of each type

	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT INDIVIDUALS	TOTAL HOURS FACE-TO-FACE	# OF DIFFERENT INDIVIDUALS
Other Psychological Interventions				
Sport Psychology/Performance Enhancement	0.00	0	0.00	0
Medical/Health Related Interventions	0.00	0	0.00	0
Intake Interview	133.50	75	0.00	0
Substance Abuse Intervention	0.00	0	0.00	0
Consultation	8.00	6	0.00	0
Other Interventions	22.50	13	0.00	0

# Please describe the nature of the experience in "Other Interventions" Behavioral counseling, feedback on recommendations

	TOTAL HOURS FACE-TO-FACE	TOTAL HOURS FACE-TO-FACE
Other Psychological Experience with Students and/or Organizations		
Supervision of Other Students Performing Intervention and Assessment Activities	231.00	0.00
Program Development/Outreach Programming	3.00	0.00
Outcome Assessment of Programs or Projects	0.00	0.00

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	TOTAL HOURS FACE-TO-FACE	TOTAL HOURS FACE-TO-FACE
Systems Intervention/Organizational Consultation/Performance Improvement	0.00	0.00
Other Psychological Experience with Students/Organizations	0.00	0.00

If "Other", please specify

Comments (if any)

## Psychological Assessment Experience

	Doctoral	Terminal Master's
	TOTAL HOURS FACE TO FACE	TOTAL HOURS FACE TO FACE
Psychological Assessment Experience		
Psychodiagnostic Test Administration	371.50	0.00
Neuropsychological Assessment	35.00	0.00
Telephone-Based Assessment	0.00	0.00
Please specify the type of telephone-based assessment services you provided along with the respective hours of each type		
Other Psychological Assessment Experience	77.00	0.00
If "Other", please specify		
Varying other psychological assessments		

Integrated Reports	
	# INTEGRATED REPORTS
Integrated Reports	
Adults	9
Children/Adolescents	4

Adult Assessment Instruments			
	# CLINICALLY ADMINISTERED/ SCORED	# CLINICAL REPORTS WRITTEN WITH THIS MEASURE	# ADMINISTERED AS PART OF A RESEARCH PROJECT
Diagnostic Interview Protocols			
SADS	0	1	0

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	# CLINICALLY ADMINISTERED/ SCORED	# CLINICAL REPORTS WRITTEN WITH THIS MEASURE	# ADMINISTERED AS PART OF A RESEARCH PROJECT
Commonly Used Neuropsychological Assessment Measures			
Brief Rating Scale of Executive Function (BRIEF)	4	4	0
Trailmaking Test A and B	35	37	0
Continuous Performance Test	7	5	0
General Cognitive Assessment			
Mini Mental State Examination (MMSE)	1	1	0
Wechsler Adult Intelligence Scale (WAIS-III)	2	1	0
Wechsler Adult Intelligence Scale-Fourth Edition (WAIS-IV)	51	49	0
Other General Cognitive Assessment Measures	3	4	0
Adaptive Behavior Assessment System - 3rd Edition (ABAS-3)			
Other General Cognitive Assessment Measures	6	6	0
Behavior Rating of Executive Function - Self Report Adult Version			
Behavioral/Personality Inventories			
Minnesota Multiphasic Personality Inventory	38	43	0
Personality Assessment Inventory	41	38	0
Other Behavioral/Personality Inventories BASC-2 Parent Rating Scales	2	2	0
Other Behavioral/Personality Inventories BASC-2 Self Report of Personality	3	3	0
Other Behavioral/Personality Inventories BASC-2 Teacher Rating Scales	1	1	0
Other Behavioral/Personality Inventories BASC-2 Self Report of Personality - College 18-25	5	3	0
Other Behavioral/Personality Inventories	3	3	0
Conners 3 - Parent Short Form			
Other Behavioral/Personality Inventories	2	1	0
Conners 3 - Teacher Short Form			
Other Behavioral/Personality Inventories	1	1	0
Conners 3, Parent Rating Scales			
Other Behavioral/Personality Inventories	3	3	0
Parent Satisfaction with Youth Scale			
Commonly Used Measures of Academic Functioning			

	# CLINICALLY ADMINISTERED/ SCORED	# CLINICAL REPORTS WRITTEN WITH THIS MEASURE	# ADMINISTERED AS PART OF A RESEARCH PROJECT
Wechsler Individual Achievement Test (WIAT)	5	6	0
WRAT-4	33	32	0
Woodcock-Johnson IV Tests of Achievement	2	1	0
Forensic/Risk Assessment			
Other Forensic/Risk Assessment Measures Child Abuse Potential Inventory	22	27	0
Other Forensic/Risk Assessment Measures	2	2	0
Competence Assessment for Standing Trial for Defendants with Mental Retardation (CAST-MR)			
Other Forensic/Risk Assessment Measures	48	46	0
Parenting Stress Index			
Other Forensic/Risk Assessment Measures	8	50	0
Short Term Assessment of Risk and Treatability (START)			
Symptom Inventories			
Other Symptom Inventories	1	0	0
Columbia Suicide Severity Rating Scale			

## Child and Adolescent Assessment Instruments

	# CLINICALLY ADMINISTERED/ SCORED	# CLINICAL REPORTS WRITTEN WITH THIS MEASURE	# ADMINISTERED AS PART OF A RESEARCH PROJECT
Parent/Youth-Report Measures			
Behavior Assessment System for Children (BASC)	4	5	0
Commonly Used Neuropsychological Assessment Measures			
Continuous Performance Test	3	3	0
Commonly Used Measures of Academic Functioning			
Wechsler Individual Achievement Test (WIAT)	5	2	0
General Cognitive Assessment			
Wechsler Intelligence Scale for Children- Fifth Edition (WISC-V)	6	3	0
WISC-IV	2	0	0
Symptom Inventories			

	# CLINICALLY ADMINISTERED/ SCORED	# CLINICAL REPORTS WRITTEN WITH THIS MEASURE	# ADMINISTERED AS PART OF A RESEARCH PROJECT
Other Symptom Inventories	1	1	0
Trauma Symptom Checklist for Children			

#### **Supervision Received**

Doctoral		Terminal Master's	
INDIVIDUAL	GROUP	INDIVIDUAL	GROUP
156.50	320.00	0.00	0.00
0.00	0.00	0.00	0.00
60.00	0.00	0.00	0.00
	INDIVIDUAL 156.50 0.00	INDIVIDUAL GROUP   156.50 320.00   0.00 0.00	INDIVIDUAL GROUP INDIVIDUAL   156.50 320.00 0.00   0.00 0.00 0.00

**Optional Comments about Other Supervisors:** 

	INDIVIDUAL	GROUP
Total Supervision Hours		
Total Hours	216.5	320.0

Please indicate whether you have made audio or video recordings of your clinical work and reviewed them with your supervisor, as well as whether you have ever been directly observed by a supervisor:

Audio Tape

Audio Tape/Digital Recording

Live/Direct Observation by Supervisor

Support Activities		
	Doctoral	Terminal Master's
Total Support Hours		
Total hours	1008.00	0.00

#### **Support Activities**

Please indicate the primary activities in which you participated that comprise your support hours activities. If you think your support hours include any activities that are unusual or unique to your program, you can highlight that as well. Consultation, clinical writing notes, assessment writing notes, trainings, didactic trainings, intervention planning, student support of clinical experiences.

## Additional Information About Practicum Experiences

	Intervention			Assessment		
	DOCTORAL	TERMINAL MASTER'S	TOTAL	DOCTORAL	TERMINAL MASTER'S	TOTAL
Treatment Settings						
Child Guidance Clinic	142.50	0.00	142.5	24.50	0.00	24.5
Community Mental Health	1.50	0.00	1.5	0.00	0.00	0.0
Department Clinic (Psychology clinic run by a department or school)	54.00	0.00	54.0	100.50	0.00	100.5
Forensic / Justice Setting (eg. jail, prison)	10.00	0.00	10.0	122.00	0.00	122.0
Inpatient Psychiatric Hospital	131.00	0.00	131.0	13.00	0.00	13.0
Medical Clinic/Hospital	1.00	0.00	1.0	0.00	0.00	0.0
Outpatient Psychiatric Clinic/Hospital	0.00	0.00	0.0	0.00	0.00	0.0
Partial Hospitalization/Intensive Outpatient Programs	0.00	0.00	0.0	0.00	0.00	0.0
Private Practice	34.00	0.00	34.0	220.50	0.00	220.5
Residential/Group Home	0.00	0.00	0.0	0.00	0.00	0.0
Schools	88.00	0.00	88.0	3.00	0.00	3.0
University Counseling Center / Student Mental Health Center	156.00	0.00	156.0	0.00	0.00	0.0
VA Medical Center	0.00	0.00	0.0	0.00	0.00	0.0
Other	149.50	0.00	149.5	0.00	0.00	0.0
If "Other", please specify University settings (e.g., classrooms)						

## Please briefly describe any psychotherapy groups you have led or co-led: (Please describe the type of group, approximate duration and average number of each group session.)

At Oregon State University, I co-led 1 group (1.5 hours; 10.5 hours total) on managing anxiety using mindfulness, DBT, and ACT techniques. I also co-led 1 group (1.5 hours; 3 hours total) on trauma empowerment using a strength-oriented approach to recovery through discussion, skill-building, and coping techniques. At Oregon State Hospital, I co-led 1 group (1 hour; 1 hour total) for using CBT for psychosis called Michael's Game, 1 group (1 hour; 15 hours total) on using CBT for psychosis for those in active psychosis, 1 group (1 hour; 10 hours total) using the Wellness Recovery Action Plan for substance use, 1 group (1 hour; 8 hours total) using Social Cognition Interaction Therapy for those suffering from psychosis, 1 group (1 hour; 8 hours total) on using CBT for problem solving.

What is your primary theoretical orientation? (Choose up to 3 and please rank order)

Cognitive Behavioral Interpersonal Integrative If "Other", please specify

What is your practicum sanctioned work experience with diverse population in a professional therapy/counseling or an assessment capacity?

Please indicate the number of clients/patients seen for the following each of the diverse populations

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	Intervention	Assessment
Race Ethnicity		
African-American / Black / African Origin	3	7
Asian-American / Asian Origin / Pacific Islander	6	5
Latino-a / Hispanic	9	5
American Indian / Alaska Native / Aboriginal Canadian	1	2
European Origin / White	59	62
Bi-racial / Multi-racial	6	2
Other	0	1

# If "Other", please specify Preferred not to specify

	Intervention	Assessment
Sexual Orientation		
Heterosexual	51	51
Gay	4	2
Lesbian	1	1
Bisexual	4	1
Other	2	1

## If "Other", please specify

Asexual	, aromantic
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	Intervention	Assessment
Disabilities		
Physical/Orthopedic	5	4
Blind/Visually Impaired	0	2
Deaf/Hard of hearing	1	2
Learning/Cognitive Disability	12	15
Developmental Disability	4	8
Serious Mental Illness	23	33
Other	4	7

If "Other", please specify Other mental illness (PTSD, Depression, Anxiety, OCD)

	Intervention	Assessment
Gender		
Male	41	45

	Intervention	Assessment
Female	53	44
Transgender	2	0
Other	1	0
If "Other", please specify		

Agender/gender non-conforming

#### **Non-Practicum Clinical Work Experience**

#### Please describe your non-practicum clinical work experience

My non-practicum clinical work experience includes the following externships and work experiences: an externship at the Comprehensive Diagnostic Assessment Clinic, an externship at Oregon State Hospital, and program sanctioned hour work experience at a forensic private practice for Department of Human Services and the Lane County Jail. At the Comprehensive Diagnostic Assessment Clinic, I provided comprehensive assessments and integrative reports for children, adolescents, and adults with concerns about having ADHD or suffering from a Learning Disability. At Oregon State Hospital, I provided group and individual therapy for inpatients with criminal histories and serious mental illness. I also provided symptom, risk, and treatability assessments. At the forensic private practice, I conducted interviews on mental health history, mental status examinations, academic and work history, social history, and substance use history for parents who were referred to us by the Department of Human Services or for recently incarcerated individuals for competency to stand trial evaluations and guilty except for insanity pleas. Additionally, I administered, scored, interpreted, and wrote comprehensive reports for parenting and forensic evaluations using a variety of neuropsychological, cognitive, parenting, symptom, personality, and other assessments.