

TARLETON STATE UNIVERSITY
PSYCHOLOGY GRADUATE SCHOOL PROGRAMS
STUDENT SURVEY OF EXPERIENCES AND RECOMMENDATIONS

Name: _____ **Date:** _____

Section 1: Please rank order the three courses that were most significant in contributing to your *personal* growth.

1.

2.

3.

Section 2: Please rank order the three courses that were most significant in contributing to your *professional and career* growth.

1.

2.

3.

Section 3: Identify the one, most significant TSU experience that has contributed to both your personal and professional growth.

Section 4: Now that you are completing the program, would you recommend it to others? Why or why not?

Section 5: What did you like best about the program?

Section 6: What did you like least about the program?

Section 7: Please give us feedback and rate the courses you have taken.

course	1 poor	2 below average	3 average	4 above average	5 excellent	not taken
CNSL 559 Brief Therapy						
CNSL 593 Play Therapy						
CPSY 509 Assmt & Treatmt Mar/Fam Ther						
CPSY 510 Family Relations & Developmt						
CPSY 520 Advanced Family Systems						
CPSY 524 Human Sex and Sex Dysfunction						
CPSY 551 Career Counseling & Guidance						
CPSY 553 Person & Counsel Theor & Applic						
CPSY 554 Group Procedures for Counsel						
CPSY 556 Intro Family Counsel & Therapy						
CPSY 557 Methods & Pract in Counsel & Psy						
CPSY 558 Counsel Persp on Psychopath						
CPSY 581 Assmt & Eval Fundamentals						
CPSY 594 Substance Abuse						
PSY 500 Behavioral Statistics						
PSY 501 Research Methods						
PSY 502 Social Psych Processes						
PSY 503 Theories of Learning						
PSY 504 Human Development						
PSY 505 Practicum I						
PSY 506 Foundat, Ethics, & Prof Issues						
PSY 511 Cultural, Minority, & Gender Issues						
PSY 513 Crisis Interv & Mgmt of Indiv & Fam						
PSY 514 Assmt of Intelligence & Achievemt						
PSY 515 Physiological Psychology						
PSY 580 Personality & Social Assmt						
PSY 582 Behavior Mgmt & Therapy						
PSY 583 Consultation & Supervision						
PSY 584 Practicum II						
PSY 587 Practicum III						
PSY 595 Internship I						
PSY 596 Internship II						
other:						
other:						
other:						
other:						

Section 8: What recommendation(s) would you make to improve the program?

Section 9: Please give us feedback about your practicum and internship field experiences.

First field placement

1. Where were you placed?
2. Did you receive adequate supervision? YES NO
If no, what would you change?
3. Did you face any situations of dangerousness toward you? YES NO
If so, what happened?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
4. Did you face any situations in which a client was suicidal or dangerous to him/herself? YES NO
If so, what happened?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
5. What was the most difficult counseling or therapy situation that you had to deal with?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
6. What did you like best about your placement?
7. What did you like least about your placement?

Second field placement

1. Where were you placed?
2. Did you receive adequate supervision? YES NO
If no, what would you change?
3. Did you face any situations of dangerousness toward you? YES NO
If so, what happened?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
4. Did you face any situations in which a client was suicidal or dangerous to him/herself? YES NO
If so, what happened?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
5. What was the most difficult counseling or therapy situation that you had to deal with?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
6. What did you like best about your placement?
7. What did you like least about your placement?

Third field placement

1. Where were you placed?
2. Did you receive adequate supervision? YES NO
If no, what would you change?
3. Did you face any situations of dangerousness toward you? YES NO
If so, what happened?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
4. Did you face any situations in which a client was suicidal or dangerous to him/herself? YES NO
If so, what happened?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
5. What was the most difficult counseling or therapy situation that you had to deal with?
 - a. Did you feel prepared to handle it? YES NO
 - b. Were you given assistance if needed? YES NO
6. What did you like best about your placement?
7. What did you like least about your placement?

What recommendations do you have, if any, to improve the practicum or internship experience?

Thank you for your honest feedback about your experiences at Tarleton. Your responses will be used as part of our ongoing program evaluation process.