|  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Postdoctoral Residency Admissions, Support, and Initial Placement Data** | | | | | | | | |
| **Date Program Tables are updated: 08/03/2023** | | | | | | | | |
|  |  |  |  |  |  |  |  |  |
| **Program Disclosures** | | | | | | | | |
| **Does the program or institution require students, trainees, and/or staff (faculty) to comply with specific policies or practices related to the institution’s affiliation or purpose? Such policies or practices may include, but are not limited to, admissions, hiring, retention policies, and/or requirements for completion that express mission and values?** | | | | | | | \_\_\_\_\_ **Yes**  \_\_\_X\_\_ **No** | |
| **If yes, provide website link (or content from brochure) where this specific information is presented:** | | | | | | | | |
|  | | | | | | | | |
|  |
|  |
|  |
|  |
|  |

|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- | --- |
| **Postdoctoral Program Admissions** | | | | | | | | | | | | | | | | |
| **Briefly describe in narrative form important information to assist potential applicants in assessing their likely fit with your program. This description must be consistent with the program’s policies on intern selection and practicum and academic preparation requirements:** | | | | | | | | |  |  |  |  |  |  |  |  |
| The Program is most favorably disposed to applicants who:  have broad-based training experience in our Program’s training competencies,  have demonstrated skills and experience in the emphasis area(s) to which they are applying,  have academic exposure to diversity issues as well as clinical experience with a  demographically diverse population,  have a strong commitment to Diversity, Equity, and Inclusion,  have experience and accomplishment in research and extensive scientific and theoretical  grounding in psychology, and  have letters of recommendations that attest to the applicant's strengths in conceptual  thinking, personal maturity and responsibility, clinical judgment, and ethical behavior. | | | | | | | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |  |
| **Describe any other required minimum criteria used to screen applicants:** | | | | | | | | |  |  |  |  |  |  |  |  |
| The program does not have any set “minimum criteria.”  Applicants must have completed all requirements of the Doctoral Degree prior to the start of the Fellowship training year.  Applicants must meet eligibility criteria for training within the VA. Please review the information on the following website regarding eligibility for Training within the VA system: <https://www.psychologytraining.va.gov/eligibility.asp> | | | | | | | | |  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |
|  |  |  |  |  |  |  |  |

|  |  |  |
| --- | --- | --- |
| **Financial and Other Benefit Support for Upcoming Training Year\*** | | |
| Annual Stipend/Salary for Full-time Residents | $57,815 | |
| Annual Stipend/Salary for Half-time Residents | N/A | |
| Program provides access to medical insurance for resident? | Yes |  |
| **If access to medical insurance is provided:** |  | |
| Trainee contribution to cost required? | Yes |  |
| Coverage of family member(s) available? | Yes |  |
| Coverage of legally married partner available? | Yes |  |
| Coverage of domestic partner available? |  | No |
| Hours of Annual Paid Personal Time Off (PTO and/or Vacation) | 13 days | |
| Hours of Annual Paid Sick Leave | 13 days | |
| In the event of medical conditions and/or family needs that require extended leave, does the program allow reasonable unpaid leave to interns/residents in excess of personal time off and sick leave? | Yes |  |
| Other Benefits (please describe): Please see training brochure. | | |
|  |  |  |
| \*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table | | |

|  |  |  |
| --- | --- | --- |
| **Initial Post-Residency Positions** |  |  |
| (Provide an Aggregated Tally for the Preceding 3 Cohorts) |  |  |
|  | **2019-2022** | |
| Total # of residents who were in the 3 cohorts | 10 | |
| Total # of residents who remain in training in the residency program | 0 | |
|  | **PD** | **EP** |
| Academic teaching | PD = 1 | EP =0 |
| Community mental health center | PD = 0 | EP =0 |
| Consortium | PD = 0 | EP =0 |
| University Counseling Center | PD = 0 | EP =0 |
| Hospital/Medical Center | PD = 0 | EP =0 |
| Veterans Affairs Health Care System | PD = 0 | EP =7 |
| Psychiatric facility | PD = 0 | EP =0 |
| Correctional facility | PD = 0 | EP =0 |
| Health maintenance organization | PD = 0 | EP =0 |
| School district/system | PD = 0 | EP =0 |
| Independent practice setting | PD = 0 | EP =1 |
| Other | PD = 0 | EP =1 |
| Note: “PD” = Post-doctoral residency position; “EP” = Employed Position. Each individual represented in this table should be counted only one time. For former trainees working in more than one setting, select the setting that represents their primary position. | | |