Nikou, Roshan

From: Graduate.Council.Web.Site@www.uky.edu Sent: Thursday, December 13, 2007 11:42 AM

Nikou. Roshan To: Cc: Price, Cleo

Subject: **Investigator Report**

AnyForm User: www.uky.edu

AnyForm Document: http://www.research.uky.edu/gs/GCInvestigatorReport.html AnyForm Server: www.uky.edu (/www/htdocs/AnyFormTurbo/AnyForm.php)

Client Address: 74.140.226.112

College/Department/Unit: = EDP masters and doctoral programs

Category: = Change

Date for Council Review: = 12/13/07Recommendation_is:_ = Approve

Investigator: = Susan Scollay E-mail Address = scollay@uky.edu

- 1 Modifications: = Two changes in the request resulted from conversations with Dr. Lynda Brown Wright, the Department Chair, and Dr. Rory Remer, representative of the program faculty:
- 1. The language describing the special grade requirement for each course (EDP 664 and EDP 665) to be included in the Graduate Student Handbook will read:

\"Regardless of a student's overall Program GPA, a grade of "B" is required [for EDP 664 and EDP 665]. If a grade of "C" is earned, the course must be repeated and a "B" earned. If a grade less than "C" is earned, the student's status in the program will be reviewed by the Program Faculty with dismissal from the program as a possible result.\"

- 2. The description of this special grade requirement will go in the University Bulletin and will read: \"\"See graduate student handbook for program grade requirements.\"
- 2 Considerations:
- 3__Contacts: = Dr. Lynda Brown Wright, listed contact person and Department Chair;
- Dr. Rory Remer, Professor and representative of the Program faculty.

With both I discussed questions I had about the rationale for and the content of the requested program change, the language describing the desired change, and the location of information giving notice to graduate students about the requested special grade requirements for the courses in question. Additionally, we discussed the need for two program change requests: one for the masters program (and EDP 664) and one for the doctoral program (and EDP 665).

4 Additional Information:

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November 26,2007

MEMORANDOUM

TO: Graduate Council

FROM: Deborah Slaton, Associate Dean

Research and Graduate Studies

Re: Attached

The College of Education has approved and submits for consideration the following:

Application for Change in Masters Degree Program Educational and Counseling Psychology in Graduate School Bulletin page 283

Change EDP 664 (Pre Masters Practicum) and EDP 665 (Post Masters Practicum) Requirements. Each course must be passed with a "B" grade to allow either further progress through the student's program and /or graduation. Less than a "B" grade will require repeating the course. Less than a "C" grade will require that no other courses may be taken until the grade is remediated. A person may be terminated from the program if a "C" or less is received. Program termination or continuation will be determined by the CPAC faculty.

Rationale for changes

Given our responsibility to produce only qualified and safe clinical practitioners for practicing professionally, we believe anything less than a passing grade at the graduate level (i.e. a "B" or better) is not adequate. Although we thought this requirement went without saying, recently a situation has occurred where it was challenged. Accordingly, we want to make the requirement specific and unambiguous.

Office of the Associate Dean Research and Graduate Studies 107 Taylor Education Building Lexington, KY 40506-0001 Phone: (859) 257-9795

Fax: (859) 323-1365

UNIVERSITY OF KENTUCKY REQUEST FOR CHANGE IN MASTERS DEGREE PROGRAM

			7				
Program:			Counseling Psychology				
Dep	partment/	Division:	Educational and Counseling Psychology		·		
College: Graduate School			Graduate School	Bulletin pp	283		
Deg	gree Title	(Old):		Major (New):		·	
CIP Code:			13.1101 (CPEC-MS), 42.1801 (ESPP- MA, ECPS-MS)	HEGIS Code:		MS), 42.1801 (ESPP-MA,	
Acc	crediting	Agency (ii	f applicable):				
I.	CH	IANGE(S)	IN PROGRAM REQUIREMENTS	<u>Cu</u>	urrent	<u>Proposed</u>	
	1.		of transfer credits allowed School limit: 9 bours or 25% of rk)				
	2.	Residence	e requirement (if applicable)		I		
	3.	Language	e(s) and/or skill(s) required				
	4.	Terminati	ion criteria				
	5.	Plan A re	quirements*				
	6.	Plan B re	quirements*				
	7.	(At least	ion of course levels required one half must be at 600+ level & two thirds in organized courses)				
	8.	Required	courses (if applicable)				
	9	Required (if applie	distribution of courses within program cable)				
	10.	` ^/	amination requirements			-	
						1 ~~	

NOTE: To the extent that proposed changes in 5, 6 or 8 above involve the addition of courses in other programs, please submit correspondence from the other program(s) pertaining to the availability of such courses to your students.

^{*} If there is only one plan for the degree, plans involving a thesis (or the equivalent in studio work, etc.) should be discussed under Plan A and those not involving a thesis should be discussed under Plan B.

UNIVERSITY OF KENTUCKY REQUEST FOR CHANGE IN MASTERS DEGREE PROGRAM PAGE 2 of 2

11.	Change to EDP664 (Pre Masters Practicum) and EDP665 (Post Masters Practicum) Requirements Each course must be passed with a "B" grade or better to allow either further progress through the student's program and/or				
	graduation. Less than a "B" grade will require repeating the course. Less the other courses may be taken until the grade is remediated. A person may be received. Program termination or continuation will be determined by the C.	terminated from the program if a "C" or less is			
IJ.	RATIONALE FOR CHANGE(S) If the rationale involves accreditation requirements, please include specific Given our responsibility to produce only qualified and safe clinical practitianything less than a passing grade at the graduate level (i.e., a "B" or better requirement went without saying, recently a situation has occurred where i requirement specific and unambiguous.	oners for practicing professionally, we believe i) is not adequate. Although we thought this t was challenged. Accordingly, we want to make the			
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Sign	natures of Approval:	Line Book Well			
~	Date of Approval by Department Faculty	Reported by Department Chair Reported by College Dean			
	Date of Approval by College Faculty	Reported by College Dean			
	*Date of Approval by Undergraduate Council	Reported by Undergraduate Council Chair			
	*Date of Approval by Graduate Council	Reported by Graduate Council Chair			
	*Date of Approval by Health Care Colleges Council (HCCC)	Reported by HCCC Chair			
	*Date of Approval by Senate Council	Reported by Senate Council Office			
	*Date of Approval by University Senate	Reported by Senate Council Office			
*If	applicable, as provided by the Rules of the University Senate				