

Appendix 5
COMPS PORTFOLIO FEEDBACK FORM

Date: __ / __ / ____

Candidate:

Advisor:

Comps
Committee:

- Preliminary Proposal
- Initial Proposal
- Revision 1
- Revision 2

Portfolio Element	Evaluation	
Presentation	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
Empirical Publication	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
Secondary Publication	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
Grant	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
Case Presentation	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
Oral Defense (Optional)	<input type="checkbox"/> Acceptable	<input type="checkbox"/> Unacceptable
Domains of Competency	<input type="checkbox"/> Assessment <input type="checkbox"/> Psychotherapy <input type="checkbox"/> Psychopathology <input type="checkbox"/> Ethics <input type="checkbox"/> Research Methods and Statistical Analyses <input type="checkbox"/> Multicultural Issues	

Comments:
