



REGISTRATION FORM: MA CLINICAL PROGRAM IN PSYCHOLOGY

Regular Session 20__ – 20__ & Summer Session 20__

Name (print): _____ Student Number: _____

U of M Email: _____

Street Address: _____ City/Prov: _____ Postal Code: _____

Preferred Phone: _____ Alternate Phone: _____

Full-Time: Part-Time: Expected Graduation Date: FEB MAY OCT YEAR 20__
(only to be completed by students in their graduating year)

PLANNING GUIDE (PLEASE REFER TO GRAD BROCHURE)

Course Requirements Year 1	Completed (√)	Registering F/W/S	Course Requirements Year 2	Completed (√)	Registering F/W/S
PSYC 7200 Quantitative Methods 1			PSYC 7080 Child/Youth Psychopathology or PSYC 7290 Psychopathology & Diagnosis		
PSYC 7210 Quantitative Methods 2			PSYC 7270 Case Conceptualization & Communication 2		
PSYC 7140 Clinical Research Design			PSYC 7560 Personality and Psychological Assessment		
PSYC 7260 Case Conceptualization & Communication 1			PSYC 7910 Clerkship Practicum in Clinical Psychology PSC Practicum 1		
PSYC 7320 Foundations of Evidence-based Treatment			PSYC 7920 Clerkship Practicum in Clinical Psychology PSC Practicum 2		
PSYC 7520 Ethics & Professional Issues Clinical Psychology			PSYC 7280 History & Systems of Psychology or PSYC 8230 Clinical Neuropsychology (or a Biological Bases of Behaviour alternative with approval – MA Ancillary)		
PSYC 7550 Intellectual & Cognitive Assessment or PSYC 7022 Psycho-Educational Assessment and Measurement 1					
GRAD 7300 Research Integrity Tutorial GRAD 7500 Academic Integrity Tutorial					
PSYC 7780 Thesis Proposal Development *** (separate registration form required)			GRAD 7000 Thesis		

*** Student must complete PSYC 7780 no later than 4th term of registration in MA level

REGISTRATION INFORMATION CURRENT ACADEMIC YEAR

Course No.	Aurora CRN	Course Name	Term F/W/S	Credit Hours	Course Class *

*Course Classification – Standard or AuXillary or Occasional or Audit

SIGNATURES:

Student: _____

Date: _____

Academic Advisor: _____

Date: _____

Associate Head (Graduate) or designate: _____

Date: _____

Notice Regarding Collection, Use, and Disclosure of Personal Information by the University

Your personal information is being collected under the authority of *The University of Manitoba Act*. The information you provide will be used by the University for the purpose of maintaining a record of progress regarding your program of study, and for communication. Your personal information will not be used or disclosed for other purposes, unless permitted by *The Freedom of Information and Privacy Act (FIPPA)*. If you have any questions about the collection of your personal information, contact the Access & Privacy Office (tel. 204-474-9462), 233 Elizabeth Dafoe Library.