



**Clinical Psychology Graduate Program
Department of Psychology**

**Clinical Psychology Program Ph.D. Comprehensive Examination:
Approval of Reading List and Outline for the Major Paper**

Please have this form completed, signed and returned to **Dr. Graham Reid**, Chair of the Clinical Program Ph.D. Comprehensive Examination Committee, by **November 16, 2018**.

Student's Name: _____
Title of Paper: _____

I have reviewed and approved the attached reading list and outline in preparation this student's Ph.D. Comprehensive Examination.

Advisor:

Name Signature

Title/Position & Institution Date

Second Reader

Name Signature

Title/Position & Institution Date