Catherine T. Harvey Center for CLINICAL SERVICES

Stanford Children's Health | Lucile Packard Children's Hospital Stanford

Doctoral Internship Program in Psychology

Academic Year 2027-2028

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http://med.stanford.edu/childpsychiatry/training/doc-psych-internship.html

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Overview of the Consortium Training Program

Lucile Packard Children's Hospital at Stanford and Children's Health Council offer a one-year, APA-accredited doctoral internship in clinical psychology with a training focus on clinical child and pediatric psychology.

Lucile Packard Children's Hospital at Stanford and Children's Health Council are adjacent institutions that are affiliated with Stanford University Medical Center and are the primary training sites for inpatient and outpatient child psychiatric care. Lucile Packard Children's Hospital at Stanford (LPCH) is a specialized 361-bed hospital providing inpatient and outpatient care to babies, children, adolescents, and expectant mothers from diverse ethnic and racial backgrounds. LPCH has established seven clinical Centers of Excellence which include Brain and Behavior, Cancer and Blood Diseases, Children's Heart Center, Pediatric Transplant, Pulmonary, Asthma, and Sleep Medicine, Orthopedic and Sports Medicine, and Pregnancy and Newborn Services. A complete listing of clinical specialties and services is available at www.stanfordchildrens.org.

Children's Health Council (CHC) is a private, non-profit multidisciplinary agency offering outpatient mental health and education services to children with emotional, learning and/or developmental problems. Children's Health Council (CHC) employs over 120 clinical staff, including child psychiatrists, psychologists, social workers, marriage and family therapists, learning disability specialists, teachers, occupational therapists and speech-language pathologists. Services include outpatient multidisciplinary diagnostic and treatment services, school-based consultation and treatment, and a therapeutic day school serving up to 90 children. Many of the children seen at CHC come from diverse backgrounds and cultures.

Interns are involved in clinical activities at LPCH and CHC. The internship provides intensive training in assessment and treatment of children and families in a variety of interdisciplinary settings. The patient population served by the two facilities ranges in age from infancy to adulthood and includes the full span of socioeconomic levels and various cultural groups, as well as a diverse range of clinical problems.

Since 1979, Children's Hospital at Stanford, Children's Health Council and the Division of Child Psychiatry at Stanford University Medical School has provided a joint training program in child clinical psychology. Prior to their joint training program, each facility had a long history of providing child psychology training independently. Both agencies are dedicated to the training of professional psychologists and psychiatrists. As such, trainees are highly valued, respected and viewed as integral members of the health care team.

The consortium training program combines the clinical experiences and resources of both institutions, thus providing a unique opportunity to gain experience with both inpatient and outpatient child populations. The program is administered by Training Directors at both sites in order to ensure appropriate oversight and coordination of the program's clinical activities and functions. A Training Advisory Committee (TAC) that is composed of representatives from both sites also supports the internship program. The TAC meets on a regular basis to review and refine various aspects of the internship program.

Internship Philosophy and Training Goals

The goal of our doctoral psychology internship program is to train outstanding future child psychologists and prepare them for entry-level professional practice. Our program aims to prepare advanced doctoral-level students to become leaders in the field of clinical child and pediatric psychology, who will be engaged in clinical practice, interdisciplinary collaboration, as well as advocacy and/or scientific investigation.

This goal is accomplished in a broad-based program where interns gain experience with a diversity of clinical problems and treatment modalities in multidisciplinary settings as a sound professional identity is consolidated. The program's extensive opportunities for the assessment and treatment of children and families experiencing a wide range of difficulties in both inpatient and outpatient settings provides a fertile basis for the development of highly skilled and culturally sensitive psychologists. Clinical rotations and caseloads are tailored to the individual needs of each intern in an effort to enhance strengths and ameliorate gaps in previous training. Within each 6 month rotation, as well as in the didactic seminars, educational and clinical experiences are presented with the recognition of the interns' increasing skills as the year progresses. For example, in early seminars, the focus is on the introduction of concepts and assessment tools. Later, the structure shifts from didactics to case presentations, readings and discussions on more complex diagnostic, formulation and treatment issues. Interns typically observe multidisciplinary team dispositions and/or parent feedback sessions before performing evaluations and feedback sessions themselves. They also observe intakes performed by attending psychologists and psychiatrists prior to taking a leadership role in conducting intakes. Supervisors and team members support interns' increasing competence by assigning more complex cases as the year progresses and gradually encouraging more autonomous functioning. For example, as interns progress on the CHC rotation they may take more of a leadership role with regard to selection of assessment measures and focusing supervision discussions on complex formulation and conceptualization skills.

The program provides interns clinical experiences informed and enriched by exposure to current empirical literature, ongoing applied research, and regular scholarly lectures. In addition, the program highlights a developmental orientation that emphasizes the integral contribution of cognition, emotion, behavior, physical development and interpersonal relationships toward the functioning of the child. As such, cognitive-behavioral, systemic, dynamic, and interpersonal perspectives are integrated into the conceptual and treatment frameworks with children and their families. The family's manner of relating to its larger ecosystem is frequently addressed through ongoing consultation with schools and other agencies. Sensitivity to clients' ethnic and cultural backgrounds is afforded a high priority as well and interns are guided in considering cultural factors that may impact a client's clinical presentation or treatment process. These orientations are reflected in a rich supervisory pool of clinicians who represent a range of evidence-based theoretical perspectives and seek to honor clients' cultural values during the consultation, assessment, and treatment processes.

In summary, the program seeks to train reflective, highly skilled and culturally sensitive

clinicians capable of functioning in a variety of clinical settings with a wide range of child and family issues and challenges. As the capstone of graduate training in child clinical psychology, our internship provides a wealth of supervised clinical experiences with inpatient and outpatient populations so that interns may develop particular areas of clinical interest as well as establishing a firm foundation in child assessment and therapy in general.

Clinical Experiences/ Structure of the Internship Program

The internship combines two six-month rotations. Interns spend six months providing hospital-based services at LPCH and six months engaged in assessment and treatment experiences at the Catherine T. Harvey Center for Clinical Services Medi-Cal Clinic within CHC. In addition, year-long activities include didactic training and outpatient psychotherapy cases, which provide experience in long-term treatment of children. Interns are expected to spend approximately one-third of their time engaged in direct patient contact, one-third time in supervision and training activities and one-third time engaged in meetings, collaboration, and documentation. Within this structure, effort is made to tailor the internship experiences to meet the training needs and individual interests of each intern.

Lucile Packard Children's Hospital at Stanford

At LPCH, interns spend three months on the Pediatric Psychiatry Consultation-Liaison Service (C/L) and three months on the Eating Disorders Team, which provides services to the Comprehensive Pediatric Care Unit located at El Camino Hospital.

- **Pediatric Psychiatry Consultation-Liaison Service:** The C/L Service provides evaluation and short-term therapy for patients with serious medical disorders seen in the inpatient pediatric units or the outpatient pediatric clinics. In addition to providing direct clinical services to the patient and family, interns also provide consultation to the medical and support staff about emotional and behavioral aspects of illness or hospitalization. Medical services that frequently refer to the C/L Service include hematology/oncology, gastroenterology, rheumatology, neurology, endocrinology, pulmonology, and heart, liver and kidney transplantation. Inpatient consultation takes place on the general pediatric medical/surgical units, the Oncology/Stem Cell Transplant Unit, as well as the neonatal, cardiovascular, and pediatric intensive care units. Typical reasons for consultation include treatment non-adherence, procedural anxiety, pain management, adjustment to illness, and disruptive behaviors. Interns also consult to the Emergency Department, often conducting risk assessments for patients presenting with suicidality. Patients range in age from infancy to young adulthood. There is also significant cultural and socioeconomic diversity among the patients followed by interns on the C/L Service.

  Each intern completes approximately 2-4 new consults per week and typically maintains an average caseload of 6-8 patients at any point in time, although the actual caseload varies depending on overall census. Interns gain exposure to a broad range of problems that present in children with medical illnesses but may also tailor their experiences to a particular illness group that they would like to emphasize in their training.

Interns receive individual supervision by the attending psychologist on the service. In addition, they attend daily C/L rounds and a weekly C/L seminar, which includes both didactics and case presentations.

- **Eating Disorders Team:** During their 3-month rotation on the Comprehensive Pediatric Care Unit, interns spend the majority of their time at a satellite LPCH unit located at El Camino Hospital. The CPCU is a fifteen-bed unit that serves adolescents with medical diagnoses occurring in the context of a debilitating mental health condition severe enough to require hospitalization. The CPCU provides a structured therapeutic milieu and is fully staffed for intensive psychiatric care of patients with pediatric and psychiatric comorbidity. Interns primarily work with adolescents with Eating Disorders who are admitted for medical instability and malnutrition. Other presenting problems include medical nonadherence and somatoform disorders. Interns typically carry a caseload of up to 5 patients, providing individual and family therapy and consulting with the milieu and school staff. The interns are part of a multidisciplinary team that includes psychiatry, psychology, and adolescent medicine attending physicians, psychiatry residents, nurses, social work, milieu counselors, occupational therapists, and hospital school staff. The intern also co-leads a process group weekly.

  Interns are responsible for presenting their cases in daily rounds. Each week, they receive one hour of individual supervision with the attending psychologist, three hours of group supervision with the attending psychiatrist spent on either case discussion or direct observation of assessment and/or intervention methods. In addition, interns participate in a journal club one hour per week as well as 1-2 hours of didactics focused on empirically- based treatments of eating disorders.

- **Outpatient Services at the Stanford Division of Child Psychiatry:** Interns who follow their long-term psychotherapy cases in the Child Psychiatry Outpatient Clinic are typically assigned cases from specialty clinics including: Anxiety Disorders, Eating Disorders, Mood Disorders, and Medical Coping and Wellness. Additional research and clinical opportunities within these clinics are sometimes available to interns who are seeking experiences beyond their clinical assignments within the structured rotations.

Children's Health Council

At Children's Health Council, interns provide clinical services to predominantly low-income clients who have Medi-Cal or Healthy Families insurance.

- **Assessment Teams:** Interdisciplinary teams provide most of the diagnostic and assessment services to children and adolescents referred to CHC. The interdisciplinary teams ensure that developmental, educational, medical, and psychological aspects of each case are all considered in the evaluation process. Interns participate on an interdisciplinary assessment team serving school-aged children and adolescents (6-18 years) which include one or more allied health specialists (e.g., educational specialist, occupational therapist, or speech and

language pathologist) who assess children for educational achievement and speech language development as well as sensory-motor skills and development. Psychological assessment typically includes interview data as well as cognitive, neuropsychological, social/emotional and developmental testing.

Assessment teams address a broad range of referral concerns and diagnostic questions. On these teams, interns learn to construct and tailor specific assessment batteries to best answer the questions posed by each referral (e.g., to rule out ADHD, Generalized Anxiety Disorder, PTSD, Major Depression, Autism Spectrum Disorder or psychosis). Typically, the assessment batteries include cognitive, executive functioning, memory, and personality as well as social/ emotional testing components. School observations are sometimes conducted in order to assess the child's academic and social functioning in the school environment. Gaining a comprehensive and holistic perspective of each child so that their needs can best be identified is the goal of our assessments.

Interns typically complete approximately 3-4 team assessments and are closely supervised by a licensed psychologist or neuropsychologist throughout each assessment. During the course of each assessment, the intern gains experience with selecting an assessment battery, administering and scoring tests, developing an integrated understanding and formulation of the case, presenting testing results and impressions in a team disposition, conducting parent conferences, and writing the final assessment report. This process emphasizes an interdisciplinary integration of findings and requires interns to learn to communicate complex concepts in caregiver- and client-friendly and meaningful ways.

- **Outpatient Psychotherapy:** The mental health staff at CHC is composed of psychologists, social workers, psychiatrists, and marriage and family therapists who provide a broad range of treatment services to children, adolescents and families experiencing emotional or behavioral difficulties throughout the greater San Francisco and South Bay Areas. CHC provides interns with a range of treatment cases requiring varying conceptual orientations and evidence-based therapeutic interventions with children, adolescents, parents and families. Emphasis is placed upon successfully engaging families in the process of developing and implementing culturally-sensitive treatment plans. Interns are responsible for a caseload of approximately eight to ten treatment cases, consisting of individual, parent, and family modalities. Effort is made to pair interns with supervisors who have expertise in the intern's general areas of interest.

- **Group Therapy:** Interns also co-lead group therapy in our RISE Comprehensive Dialectical Behavior Therapy Adolescent Intensive Outpatient Program (IOP), which is a collaborative program with Stanford. The groups use a DBT, evidence-based approach to treat adolescents with moderate to severe anxiety and depression and high-risk behaviors. Each intern co-leads (with a licensed staff) a multifamily skills group which focuses on DBT skill-building in the context of the family system. Interns also co-lead (with a licensed staff) a DBT Parent Coaching Skills Group to support parents in developing effective DBT skills for parenting high risk clients. Interns participate in weekly meetings of our DBT consultation team made up of our multidisciplinary clinical staff. This team provides support to the treatment

providers as they review DBT principles and practices, navigate individual cases, and manage the stress of treating high risk clients.

Didactic Training

Interns participate in **weekly seminars** on Wednesday mornings with topics focused on profession-wide competencies (e.g., assessment, intervention, diversity, ethics, supervision) within child clinical and pediatric psychology. Additionally, interns participate in a twice monthly **process group** to provide them with an opportunity to reflect upon and discuss professional development issues with a facilitator who is external to both agencies. While rotating through RISE at CHC, interns participate in weekly **Dialectical Behavioral Therapy training seminar** to support their development and practice of DBT skills in the context of group, individual and family therapy, building their skills as a DBT practitioner. Interns are also exposed to adaptations of DBT across levels of care and diagnoses, including disordered eating, trauma, and substance use. Finally, **rotation-specific seminars on the Eating Disorders Unit and Consultation-Liaison Service** are provided.

Optional Didactic Experiences

1. **Stanford University Department of Psychiatry Grand Rounds:** Grand Rounds are held weekly at the Stanford University Medical Center from September to June. Researchers and clinicians from both within and outside the University present on topics of clinical interest. One week per month, the topic pertains to a particular area within child and adolescent psychiatry.

2. **LPCH Department of Pediatrics Grand Rounds:** Pediatric Grand Rounds are held weekly for the LPCH residents and faculty. Presentations include current research topics related to the etiology and treatment of a variety of medical disorders. Interns can choose to attend any of these presentations.

3. **Professional Workshops:** As an authorized continuing education provider in the state of California, CHC offers 3-4 continuing education classes per year for psychologists. Interns are offered registration at these workshops free of charge.

Supervision and Evaluation

All interns receive at least four hours of supervision per week. Individual supervision is provided by clinical training staff at each site as well as by voluntary clinical faculty. The clinical staff at each training site provides two to three hours of supervision per week. Additional supervision is provided in a group supervision format and by supervisors who are on the Voluntary Clinical Faculty at the Stanford University Medical School. While the majority of supervision is provided by licensed psychologists, other licensed clinicians such as psychiatrists and clinical social workers may provide supplemental supervision to interns.

The supervisors in this training program represent a wide range of theoretical perspectives, such as developmental, cognitive behavioral, psychodynamic, systems, and narrative viewpoints. We believe this diversity of perspectives enhances the quality of our training program. All supervisors are expected to discuss relevant scientific and empirical issues with interns, and to review relevant ethical and diversity issues that arise with particular cases and/or within the context of the intern's judgments and performance. Supervision is viewed as an opportunity for the trainee not only to benefit from the supervisor's expertise, but also to develop increasing self-awareness of strengths, weaknesses, and therapeutic values and attitudes. Supervision is also utilized as an arena for the exploration of the interns' emotional responses to clients and families. This process is viewed as essential to becoming a competent clinician. Typically, the intern's responses to a particular family or child are discussed rather than the intern's personal history. In this way, the focus is on the evoking messages that the client and his/her family communicate, and the meaning this may have in the family or care giving system.

Interns are evaluated by their supervisors on a quarterly basis and provided with feedback about clinical strengths as well as areas for improvement. At the beginning of the internship year, interns are provided with a copy of the evaluation form that will be utilized, so that they are aware of the areas where they are being evaluated.

In addition to supervisors' evaluations of interns, interns and co-directors of the training program participate in monthly check-in meetings to discuss programmatic issues. Interns participate in an annual training retreat along with Stanford's Child Psychiatry Psychology Postdoctoral Fellows and Child Psychiatry Fellows to discuss issues of professional development as well as program review. Intern feedback is viewed as vital to the ongoing refinement and updates of this training program.

Successful Completion of the Internship Program

Interns must receive a minimum rating of "Competent" by the end of the year on each of the evaluation items in the competency areas listed below.

1. Research- Demonstrates the substantially independent ability to critically evaluate and disseminate research or other scholarly activities.

2. Ethical and Legal Standards- Demonstrates and acts in accordance with relevant professional standards and guidelines, institutional, state and federal laws and regulations as well as with APA Ethical Principles of Psychologists and Code of Conduct.

3. Individual and Cultural Diversity- Demonstrates knowledge, awareness, sensitivity, and skills when working with diverse individuals.

4. Professional Attitudes and Values- Demonstrates maturing sense of professional identity, awareness of and receptivity to areas needing further development. Responding professionally in increasingly complex situations with greater degree of independence.

5. Communication and Interpersonal Skills- Demonstrates effective communication skills and the ability to form and maintain effective professional relationships.

6. Assessment- Performs evidence-based psychological assessment of youth across the age spectrum with a variety of diagnoses, problems, and needs.

7. Intervention- Demonstrates knowledge of and applies evidence-based interventions for youth across the age spectrum.

8. Supervision- Demonstrates knowledge of supervision models and practices. Applies this knowledge in direct or simulated practice.

9. Consultation/ Interprofessional/ Interdisciplinary skills- Demonstrates knowledge and respect for the roles and perspectives of other professions. Applies this knowledge in consultation with families, interprofessional groups, and other health care professionals.

10. Pediatric Psychology- Demonstrates knowledge of the impact of illness and medical treatment on child development and family functioning. Conducts targeted biopsychosocial assessments and provides effective consultation to facilitate adjustment and positive functioning within the health-care setting.

Interns are expected to complete a minimum of 1800 hours of supervised professional experience on a full-time basis across 12 consecutive months and completion of the minimum assessment and treatment caseload as defined by each rotation.

Interns should note that the number of training hours required for licensure varies by state and provincial laws. It is each intern's responsibility to ensure that their accrued hours of training meet the minimum requirements in the state or province in which they plan to seek licensure.

Application Form: The application form can be accessed through the APPIC website at http://www.appic.org. In addition to the standard AAPI Online application, two clinical assessment reports that include psychological testing, preferably conducted with children or adolescents, are required as supplemental materials. Applications will not be considered unless all required application materials are submitted via the AAPI Online by the **November 1st** deadline.

Lucile Packard Children's Hospital at Stanford and Children's Health Council are Equal Opportunity Employers. Applicants of diverse backgrounds and experiences are strongly encouraged to apply.

We will notify all applicants of their application status via e-mail by December 15.

Interview: Selected applicants will be invited for virtual interviews which occur on four days during the month of January. When invited to interview, applicants are asked to rank their preference of interview dates. Effort is made to provide applicants with their first choice date, but this may not be possible as a limited number of applicants are interviewed each day.

APPIC: We follow APPIC match policies for the internship selection process. These guidelines are available at http://www.appic.org. Please review these guidelines. This internship site also agrees to abide by the APPIC policy that no person at this training facility will solicit, accept, or use any ranking-related information from any intern applicant.

Additional Requirements: Please note that applicants matched to the internship must successfully pass a brief medical examination and drug test through Stanford Occupation Health no less than one week prior to the start of internship. COVID-19 vaccination and TB testing will also be required. In addition, California law requires that individuals having direct contact with children must be fingerprinted prior to employment. Thus, as a pre-condition of employment, matched interns are required to be fingerprinted and must pass a criminal background check prior to the start of the training year. Fingerprint cards or reports from previous employers are not acceptable.

As interns are hired as employees of Stanford Children's Health, they are required to participate in an employee orientation prior to the internship training orientation which begins on July 1. The date of this employee orientation varies but is often scheduled 1-2 weeks before the start of internship.

Internship Admissions, Support, and Initial Placement Data

Date Program Tables are updated: August 28, 2026

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:	
N/A	

Internship 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:
Applicants must be enrolled in an APA-accredited clinical, counseling, or school psychology doctoral program. Applicants must be in good standing in their graduate program, have completed all their formal course work and qualifying examinations, and have only the dissertation requirement to meet when commencing the internship year.

Does the program require that applicants have received a minimum number of hours of the following at time of application? If Yes, indicate how many:			
Total Direct Contact Intervention Hours	N	**Y**	Amount: 300
Total Direct Contact Assessment Hours	N	**Y**	Amount: 100
*Some assessment and intervention experience with children and/or adolescents is required.			

Describe any other required minimum criteria used to screen applicants:
Applications are evaluated on a variety of factors including previous clinical experiences, background in psychological testing, writing skills, expressed interests and stated training goals. We seek candidates with academic and clinical training and professional goals that align with the training opportunities provided through our internship program. Competitive applicants will have cognitive assessment experience and experience using evidence-based therapy approaches with children and/or adolescents. Previous experience in hospitals or multi-disciplinary settings is desirable but not necessary. We value applicants who come from diverse backgrounds and present strong multicultural interest and skills as demonstrated in their application materials. Strong preference is given to candidates who desire a career in clinical child and pediatric psychology.

Financial and Other Benefit Support for Upcoming Training Year*

Annual Stipend/Salary for Full-time Interns	78,000	
Annual Stipend/Salary for Half-time Interns	N/A	
Program provides access to medical insurance for intern?	**Yes**	No
If access to medical insurance is provided:		
Trainee contribution to cost required?	Yes	**No**
Coverage of family member(s) available?	**Yes**	No
Coverage of legally married partner available?	**Yes**	No
Coverage of domestic partner available?	**Yes**	No
Hours of Annual Paid Personal Time Off (PTO and/or Vacation)	288	
Hours of Annual Paid Sick Leave	Included in PTO	
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**	No
Other Benefits (please describe): Dental coverage and optional vision plan.		

*Note. Programs are not required by the Commission on Accreditation to provide all benefits listed in this table

Initial Post-Internship Positions

(Provide an Aggregated Tally for the Preceding 3 Cohorts)

	2022-2025	
Total # of interns who were in the 3 cohorts	12	
Total # of interns who did not seek employment because they returned to their doctoral program/are completing doctoral degree	0	
	PD	**EP**
Academic teaching	0	0
Community mental health center	0	0
Consortium	0	0
University Counseling Center	0	0
Hospital/Medical Center	10	0
Veterans Affairs Health Care System	0	0
Psychiatric facility	0	0
Correctional facility	0	0
Health maintenance organization	0	0
School district/system	0	0
Independent practice setting	1	0
Other – University Behavioral Health Organization	1	0

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.

Questions about the internship program can be directed to:

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Director, Internship Training Program
Division of Child and Adolescent Psychiatry
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This internship is accredited by American Psychological Association. For further information, contact: Committee on Accreditation, c/o Office of Program Consultation and Accreditation - APA, 750 First Street, NE, Washington, DC 20002-4242. 202-336-5979.

If you would like further information about the Children's Health Council and the Division of Child and Adolescent Psychiatry at Stanford, please refer to our respective websites below:

- Children's Health Council:
  http://www.chconline.org/

- Division of Child & Adolescent Psychiatry at Stanford:
  http://med.stanford.edu/childpsychiatry.html

Training Faculty

I. Lucile Packard Children's Hospital at Stanford

- **Michelle Brown, PhD** – Director of Internship Training
- **Anaid Atasuntseva, PhD** – Intensive Outpatient Program Supervisor
- **Michele Berk, PhD** – Intensive Outpatient Program Supervisor
- **Stephanie Clarke, PhD** – Comprehensive Care Program Supervisor
- **Kristene Hossepian, PhD** – Comprehensive Care Program Supervisor
- **Madison Sunnquist, PhD** – Consultation-Liaison Service Supervisor

II. Children's Health Council

- **Carlina Wheeler, PhD** – Director of Internship Training, Psychotherapy Supervisor
- **Joaquin Burciaga, PhD** – Psychological Assessment Supervisor
- **Nielson Chan, PhD** – Psychological Assessment Supervisor
- **Patrice Crisostomo, PhD** – Psychotherapy Supervisor
- **Marjan Ebadi, PhD** – Psychotherapy Supervisor
- **Morgan Eldridge, PhD** – Psychotherapy Supervisor
- **Erin Hoolihan, PsyD** – Psychotherapy Supervisor
- **Dylan Stewart, PsyD** – Psychological Assessment Supervisor
- **Zahra Murtaza, PhD** – Group Supervisor

III. Core Adjunct Clinical Faculty

- **Elizabeth Karp, PhD** – Clinical Supervisor
- **Ramsey Khasho, PsyD** – Clinical Supervisor
- **Julie Lustig, PhD** – Clinical Supervisor
- **Jenna Rinsky, PhD** – Clinical Supervisor