

AMERICAN PSYCHOLOGICAL ASSOCIATION
COMMITTEE ON ACCREDITATION

Self-Study Report Guidelines in Preparation for Accreditation
Site Visit of **Doctoral** Program in Academic Year **1994-95**

Program Specialty:
 Clinical Counseling School Combined

Degree Granted:
 Ph.D. Psy.D. Ed.D. Optional (specify)

Institution: Colorado State University

Address: Dept. of Counseling Psychology, Clark Building
Fort Collins, CO 80523-1876

College or Professional School: College of Natural Sciences

Dean: John C. Raich, Ph.D.

Signature of Dean: John C. Raich

Department or Division: Dept. of Psychology/Counseling Psychology Program

Chair or Head: Scott B. Hamilton, Ph.D. Area Code & Telephone: (303) 491-6364

Title: Department Chair

Signature of Chair or Head: Scott B. Hamilton 303-491-6364

Director of Training: Charles W. Cole, Ph.D. Area Code & Telephone: (303) 491-6077

Title: Director of Training/Counseling Psychology Section Chair

Signature of Director of Training: [Signature]

Please prepare **six** copies, including all attachments, and bind the materials in a notebook using indexed tabs to separate sections. **Six weeks** prior to your scheduled site visit, **three** of these copies should be distributed to your program site visit team, **two** should be sent to the APA, and one is for your use.

Office of Program Consultation and Accreditation
American Psychological Association
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Washington, D.C. 20002-4242