



UNIVERSITY OF KENTUCKY

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COLLEGE OF EDUCATION

EdS Student Name:

Student Year in Program:

Form Completion Date:

Meeting Date: (Fall with advisor, complete part 2 in meeting)

Part 1: *Please make check marks for components completed. In the comments section, indicate dates of completion and/or anticipated dates of completion. Indicate sites of practicum/hours completed.*

Competency Benchmarks:		Comments (indicate completion date, information on placement of practicum/internship, or anticipated date of completion)		
	Curriculum Contract and Handbook Review (completed at orientation year 1)			
	Program Course of Study (<i>List courses completed and grade obtained, review of transcript</i>)	Fall Year 1	Spring Year 1	Summer Year 1
		Fall Year 2		Spring Year 2
		Fall Year 3		Spring Year 3
	Ally Training			
	SJSS	Spring Year 1		
		Spring Year 2		
	Master's Oral Exam			

Educational, School, and Counseling Psychology
237 Dickey Hall • Lexington, KY 40506-0017
(859) 257-7881 • (859) 257-7404 • fax (859) 257-5662
<http://education.uky.edu/EDP/>

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	Practicum (first Year; Note site and hours completed)	
	Practicum (second Year; Note site and hours completed)	
	Praxis Exam	
	Internship	
	Ed.S. Case Study Exam	
	Additional Activities of Note (e.g., Professional Memberships; Social Justice Activism; Volunteerism)	Comments:

Part 2: *To Be Reviewed in the meeting (nothing to be completed by the student):*

Domain I. Professional Conduct

Domain II: Interpersonal Competence

Domain III. Evidence-Based Practice Competencies

Domain IV. Foundational Knowledge as a School Psychologist

Domain V. Research Competencies



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Following the advising meeting and review of annual data, it is noted that the student is:

On Track and making progress

On Track and will target the following Domains:

Missing the following Competencies and/or Needs to Improve the following Domains (a meeting will be scheduled with the advisor.) The following plan will be implemented:

Thank You!

The School Psychology Faculty

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