Clinical Psychology Internship

Applicant Brochure

Wilford Hall Ambulatory Surgical Center
Joint Base San Antonio - Lackland
San Antonio, Texas 78236

A psychology internship in the generalist tradition
Updated August 2015

Accredited by the American Psychological Association since 1971

“Outstanding Training Program of the Year – 2002”
by the Association for Behavioral and Cognitive Therapies (ABCT)

Member, Association of Psychology Postdoctoral and Internship Centers (APPIC) since 1976
# Table of Contents

<table>
<thead>
<tr>
<th>Topic</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>APA Accreditation and APPIC Program Membership</td>
<td>3</td>
</tr>
<tr>
<td>Quick Facts about the Psychology Internship Program</td>
<td>5</td>
</tr>
<tr>
<td>Air Force Internship Programs</td>
<td>7</td>
</tr>
<tr>
<td>Eligibility Criteria</td>
<td>7</td>
</tr>
<tr>
<td>Non-Discrimination and Equal Opportunity</td>
<td>7</td>
</tr>
<tr>
<td>Post Internship Professional Duties</td>
<td>8</td>
</tr>
<tr>
<td>Benefits</td>
<td>8</td>
</tr>
<tr>
<td>Annual Salary – Basic Pay, Allowance for Subsistence &amp; Housing</td>
<td>8</td>
</tr>
<tr>
<td>Administrative Support</td>
<td>9</td>
</tr>
<tr>
<td>Training Schedule</td>
<td>10</td>
</tr>
<tr>
<td>Annual/Convalescent Leave</td>
<td>10</td>
</tr>
<tr>
<td>Initial Assignments after Internship Graduation</td>
<td>11</td>
</tr>
<tr>
<td>Training Model &amp; Goals</td>
<td>12</td>
</tr>
<tr>
<td>Our Medical Facility and Community</td>
<td>16</td>
</tr>
<tr>
<td>Dynamic Training Environment</td>
<td>16</td>
</tr>
<tr>
<td>Summary of the Psychology Internship Year/Rotation Outline</td>
<td>17</td>
</tr>
<tr>
<td>Training Description</td>
<td>20</td>
</tr>
<tr>
<td>Rotations</td>
<td>20</td>
</tr>
<tr>
<td>Didactic Program</td>
<td>23</td>
</tr>
<tr>
<td>List of Distinguished Visiting Professors</td>
<td>25</td>
</tr>
<tr>
<td>Intern Evaluation</td>
<td>26</td>
</tr>
<tr>
<td>Training Program Evaluation</td>
<td>26</td>
</tr>
<tr>
<td>Supervision</td>
<td>27</td>
</tr>
<tr>
<td>Faculty and Intern Contact Info*</td>
<td>27</td>
</tr>
<tr>
<td>Application Procedure</td>
<td>28</td>
</tr>
<tr>
<td>APPIC Policy</td>
<td>28</td>
</tr>
<tr>
<td>Air Force Selection &amp; Match Day</td>
<td>29</td>
</tr>
<tr>
<td>AF Internship Training Sites</td>
<td>31</td>
</tr>
<tr>
<td>Application Instructions</td>
<td>32</td>
</tr>
<tr>
<td>Application Checklist</td>
<td>34</td>
</tr>
<tr>
<td>Applicant Questions Form</td>
<td>35</td>
</tr>
<tr>
<td>APPENDIX A – Air Force Assignments Around the World</td>
<td>36</td>
</tr>
<tr>
<td>APPENDIX B – Frequently Asked Questions</td>
<td>37</td>
</tr>
<tr>
<td>APPENDIX C – What Makes WHASC Unique</td>
<td>49</td>
</tr>
</tbody>
</table>

*In compliance with DoD Web Policy and for the safety of all staff members – names, affiliations, and locations are not disclosed in public media, but may be provided by request.
Wilford Hall Ambulatory Surgical Center Training Opportunities:

Outpatient Mental Health
Clinical Health Psychology
Primary Care Psychology
Behavioral Analysis Service
Assessment/Neuropsychology Screening
Alcohol and Drug Abuse Prevention and Treatment
Family Advocacy Program
Clinical Investigation/Dissertation
Deployment Psychology

Thank you for your inquiry regarding our APA-accredited Clinical Psychology Internship Program at Wilford Hall Ambulatory Surgical Center (WHASC) located at Joint Base San Antonio-Lackland (JBSA), San Antonio, Texas.

Each year, we accept up to 12 interns who, upon graduation, go on to guaranteed clinical psychology positions in the Air Force. We are the oldest and largest of the Air Force Psychology Internship training programs. As of August 2015, we have graduated a total of 491 interns and can rightfully claim that we have trained more military psychologists than any other training program in the world.

We emphasize broad-based clinical psychology professional training within a major military ambulatory surgical center alongside the Air Force’s largest Psychiatry Residency Program. These resources plus 35 other graduate medical training programs and 22 graduate allied healthcare training programs create a stimulating environment for professional psychology training and interdisciplinary teamwork.
Accreditation

We are accredited through 2015 based on our latest 5-year re-accreditation by the American Psychological Association’s Commission on Accreditation.

Questions related to the program’s accredited status should be directed to the Commission on Accreditation:

Office of Program Consultation and Accreditation
American Psychological Association
750 1st Street, NE, Washington, DC 20002
Phone: (202) 336-5979 / E-mail: apaaccred@apa.org

APPIC Membership

The Wilford Hall Ambulatory Surgical Center (WHASC) Clinical Psychology Internship program is a member of the Association of Psychology Postdoctoral and Internship Centers (APPIC) and follows APPIC policies on internship offers and acceptances. We participate in the APPIC Matching Program. Details of the APPIC program and policies can be viewed on APPIC’s web site (http://www.appic.org). The Wilford Hall Ambulatory Surgical Center APPIC Match number is 158911.

APPIC’s mailing address is: APPIC Central Office, 17225 El Camino Real, Suite #170, Houston, Texas, 77058-2748. Their phone number is: 832-284-4080.

We are eager to talk with you about your interest in the Air Force Psychology Internship and encourage you to contact us. We can be reached by phone at 210-292-5972 or by email to: airforcepsychology@gmail.com

NOTE: Three Air Force pre-doctoral psychology internships are available (Malcolm Grow, Wilford Hall and Wright-Patterson). Each is located in a major Air Force teaching facility that sponsors medical residencies. For administrative purposes, our internships have been grouped with these graduate medical education programs and have a long tradition of being referred to within the Air Force as "residencies."
Quick Facts
Wilford Hall Ambulatory Surgical Center
Clinical Psychology Internship

- Accredited by the American Psychological Association (APA) since 1971
- Scientist-practitioner and empirically based training and clinical practice model
- "State of the science" training in Clinical Health Psychology, Neuropsychological Screening, Primary Care Psychology, Community Outreach/Prevention and Evidence Based Treatment for PTSD
- Psychology Faculty represents a wide range of expertise. They are united in their commitment to mentoring and training the next generation of outstanding psychologists
- Supervision consistently rated as outstanding in both quantity and quality by program alumni
- Didactic Program with Master Trainers and Distinguished Visiting Professors (DVPs) of national reputation
- Opportunities to work with a broad spectrum of patient populations and disorders from the healthy, competent leader coping with a severe stressor to a young Airman who has just experienced their first psychotic episode and required commitment to inpatient care
- Guidance, mentoring and support to complete your dissertation prior to graduating from internship
- Research Seminar and additional opportunities offered to stay active in research and get answers to important clinical questions that will make a difference in the lives of our Air Force members and their families
- Excellent Pay/Benefits during internship and 3 additional years of follow-on employment
- Pay/benefits at rank of an AF Captain including base salary, food/housing allowance (tax free), medical benefits, family health care coverage, optional family dental care, (see “Benefits” section), and time off including 30 paid vacation days (see “Annual/Convalescent Leave” section) plus holidays
- In 2015, the value of the Salary (Base + Food + Housing Allowance) package for interns training at the Wilford Hall Ambulatory Surgical Center was approximately $5,788.98 per month for single interns ($69,467.76 per year) and $5,824.98 per month for interns with dependents ($69,899.76 per year).
- Post-internship employment carries high levels of professional responsibility and the opportunity to develop leadership and management skills that greatly enhance market competitiveness for future positions as an Air Force or Civilian Psychologist
- WHASC Interns are expected to achieve Psychology Licensure within 18 months of graduation from internship. The Air Force currently recognizes those who achieve
licensure with a Psychology Specialty Incentive Bonus of $5,000 per year while serving on active duty status working as a Clinical Psychologist. Those who go on to achieve ABPP status are currently eligible for Psychology Incentive bonus of an additional $6,000 per year!

- Once a member achieves licensure, they will have the privilege of serving as a mental health provider to military members in an active combat zone. At the current tempo of the war, the length of deployment for AF Psychologists is about 6 months. A member can anticipate serving one deployment during their initial 4 year service commitment. However, these timelines and durations are all subject to change if and when the need roles for Air Force Psychologists in this deployment mission changes.

- We identify the opportunity to serve in a deployed setting as a privilege. Most AF Psychologists identify this event as the most meaningful activity they have done in their professional career.

- Fellowship Training Opportunities – Following the completion of one’s initial 4 year service commitment, an AF Psychologist may compete for a paid fellowship in one of specialty areas where the Air Force anticipates an increased need for specialists. In the past, paid fellowships have been offered in Clinical Health Psychology, Child Psychology, Psychopharmacology, Clinical Neuropsychology, and Aviation/Operational Psychology. Those chosen for fellowship incur an additional active duty service obligation following completion of fellowship.

- For current events in WHASC Psychology, check out our Facebook page

AIR FORCE INTERNSHIP PROGRAMS

The United States Air Force (AF) offers up to 24 fully funded one-year intern positions in clinical psychology. Internships are available at Wilford Hall Ambulatory Surgical Center (WHASC), Malcolm Grow Medical Center, and Wright-Patterson Medical Center.

The Air Force accepts applications from all qualified persons who meet the following eligibility requirements.

ELIGIBILITY CRITERIA

To be eligible for commission and consideration for intern selection, the applicant must:

b. Meet the health and fitness requirements for commissioning in the United States Air Force as determined by medical history and physical examination.
c. Meet the standards for issuance of a “Secret” security clearance as determined by history and background investigation.
d. Satisfactorily complete all academic and practica requirements for the Ph.D. or Psy.D. in clinical, counseling, or combined professional-scientific psychology from an APA-accredited graduate program (Air Force Instruction 44-119, 7.9.2.1). This includes, at a minimum, the completion of preliminary and comprehensive examinations and doctoral dissertation proposal approval.
e. Be ready for internship as certified by the Director of Clinical Training at their graduate program.
f. Dissertation progress is a factor in the selection process. Completion of the dissertation prior to internship is strongly encouraged to allow for full participation in the wealth of training opportunities available during the internship.
g. Completed a minimum of 500 face-to-face hours of supervised practicum experience by the time the application is submitted.

PLEASE NOTE: Selection for our intern positions are contingent upon selectee’s acceptance of a commission in the United States Air Force and serving on active duty throughout the internship year, and the following 36 months.

NON-DISCRIMINATION AND EQUAL OPPORTUNITY

- As a matter of Federal and military policy, the AF and AF psychology training programs fully adhere to the practices and procedures of the Equal Employment Opportunities Act in the selection of trainees and employees. The AF views diversity and equal opportunity as a vital part of providing patient care, creating a fair and respectful work environment, and ultimately maintaining a healthy and synergistic workforce. We are committed to fostering diversity through hiring and selection practices that conform to US law and regulation.

- Current Federal law allows individuals to serve in the military regardless of their sexual orientation. We recommend you contact your Health Professions recruiter with questions regarding current law.
Eligibility for military service requires robust health as defined by a health history free of impediment (specified list of injuries, illnesses, diagnoses, medical procedures/treatments) and current physical fitness that meets the standards for age, height, weight, visual/hearing acuity, physical strength/endurance tests, etc.

Eligibility for commissioning as a United States Military Officer requires impeccable moral character as defined by a life history free of impediment (specified list of exclusions related to ethical violations, personal finance/credit management, contacts with governmental authorities and law enforcement agencies, etc.).

The main point of contact for questions about these health, fitness, and moral eligibility standards is a Health Professions recruiter from the Air Force Recruiting Service (AFRS). The Health Professions recruiter is authorized to screen for health, fitness, and legal conditions that may be disqualifying for AF Commissioned Officer service.

POST INTERNSHIP PROFESSIONAL DUTIES

The position of clinical psychologist in the Air Force is comparable to that of many civilian psychologists. Duties primarily depend upon the needs of the individual clinic or the Air Force community in which one works. Depending upon one’s interests or skills, even in initial duty assignments, Air Force psychologists are typically given levels of responsibility and autonomy rarely seen in other contexts, and the WHASC internship program prepares interns to effectively transition into their role as AF psychologists. The initial assignment invariably provides a superb foundation for a future military, or civilian, clinical psychology career.

BENEFITS

Interns receive the rank, pay and benefits of an Air Force Captain, including competitive base salary, tax-free housing allowance based on regional cost of living, family medical coverage and optional family dental package, and time off including 30 paid vacation days plus all federal holidays. For specific salary and benefits, see the military pay charts (http://www.dfas.mil/militarymembers). To calculate current pay, use the website to identify:

1. Basic pay
   a. At the above link, select “Pay & Allowances”
   b. Select “Military Pay Charts”
   c. Select most current date (i.e., Jan 1, 2015)
   d. On the chart, find the monthly pay for “<2” Years of Service and Grade of “O-3”
   e. This number is your monthly basic pay

2. Basic allowance for subsistence (tax free)
   a. At the above link, scroll to page 3 of the Pay Table and find “Basic Allowance for Subsistence”
   b. Use the rate for “Officers”
   c. This number is your monthly, tax-free basic allowance for subsistence (i.e., food)

3. Basic allowance for housing: (https://www.defensetravel.dod.mil/site/bahCalc.cfm)
   a. Select the current year, enter zip code “78236”, and select the grade “O-3”
b. The figure under the heading “O-3 without Dependents” is the monthly tax-free housing allowance if you are single. The figure under the heading “O-3 with Dependents” is the monthly tax-free housing allowance if you are married or have children.

4. Add the figures obtained in 1-3 above and multiply by 12 to calculate your total pay for each year.

An Air Force Health Professions Recruiter can help you calculate your pay if you have difficulty accessing the above website or calculating the total. They can also provide you with detailed information about the other extensive benefits you receive as an officer in the Air Force.

ADMINISTRATIVE SUPPORT

While the internship is located at Wilford Hall Ambulatory Surgical Center, the sponsoring institution is the San Antonio Uniformed Services Health Education Consortium (SAUSHEC). SAUSHEC is comprised of 35 Graduate Medical Education programs and 22 Allied Health Education programs. SAUSHEC provides administrative and budgetary oversight for all of the Air Force graduate medical education and allied health education programs at Wilford Hall Ambulatory Surgical Center including both the Clinical Psychology Internship and the Clinical Health Psychology Postdoctoral Fellowship programs. Budgetary allocations are announced at the beginning of each new budget year (October 1) and have provided funds to cover accreditation fees, support for our Distinguished Visitors and Special Training Workshops, and some travel funds for interns who may, as first authors, have papers accepted for presentation, at national conferences.

We have one staff position, the Training Program Coordinator, to provide administrative and secretarial support to the training programs. Our Program Coordinator maintains the official training files, assists with duty hour logs and work load reporting, assists interns with Leave and Defense Travel System (DTS) arrangements, and coordinates our Distinguished Visitors Program, Special Training Workshops, Interview Day for Applicants, and Orientation for New Interns.

The 59th Medical Operations Squadron/ Mental Health Flight and the 559th Medical Group/SGPK (BAS) both provide valuable support to the training programs through the allocation of office and training space, office supplies, training staff to assist with orientation, Basic Life Support training, etc.

All interns are assured of appropriate work space with assigned offices equipped with up-to-date computer equipment, stand-alone laptops to record patient care (for supervision purposes), convenient printers/scanners/copiers, secure file storage, telephones/voice mail, etc. Interns are assigned to offices within the clinics in which they work. Interns on elective rotations are also provided work space. The arrangement of intern offices is designed to facilitate peer socialization, support, and interaction. Efforts are made to assign intern offices that are close in proximity to clinical supervisors in order to encourage frequent interaction and allow supervisors to easily monitor the intern’s clinical activities.

The 59th Mental Health Flight makes available 3 large conference rooms that are fully equipped with computers and audiovisual equipment for training program activities,
department meetings, didactics, training workshops, etc. We have easy access to the hospital's video teleconferencing rooms and use this technology for meetings with our colleagues at San Antonio Military Medical Center (SAMMC) as well as other Air Force Clinical Psychology Internship Training sites.

Psychology interns have access to assessment instruments, including computer based testing packages and therapy tools (e.g., virtual reality technology and digital tape recorders for patients enrolled in Prolonged Exposure for PTSD) specific to their rotation assignments. Both of the major rotations, Mental Health Clinic and Clinical Health Psychology, as well as the required Assessment rotation have designated assessment space for psychological testing. In addition, when training on CHP, interns are trained in biofeedback with state of the art equipment.

Interns and faculty also have excellent access to all of the relevant bio-behavioral professional journals and publications through the Wilford Hall Medical Library and through AF Medical Service's web-based portal. Most articles are delivered electronically within 24 hours.

**TRAINING SCHEDULE**

**Commissioned Officer Training**
The internship training year formally begins in early to mid-August. It is preceded, however, by Commissioned Officer Training, a mandatory, five-week course at Maxwell Air Force Base in Alabama. This course acts as an introduction to the Air Force and the Air Force Medical Service. During this time (beginning the last week of June to the end of July), new interns obtain uniforms, establish pay records, engage in rigorous physical training, and learn about military leadership as well as their new roles and responsibilities as military officers.

**Orientation/In-Processing at Wilford Hall**
Following the graduation ceremony (Friday) at Maxwell AFB, interns are given 3 days to travel/drive to Joint Base San Antonio-Lackland. They are expected to report for duty on the following Tuesday at 0730. All interns receive orientation together and complete designated training in Air Force policy, procedures, regulations, human resource and benefits administration, and information systems practices before formal clinical training begins in mid-August.

**Duty Hours**
At Wilford Hall Ambulatory Surgical Center, the established duty (work) day schedule is 0730-1630. During these hours, the facility's clinics are open for patient appointments and services. Interns may be expected to be at their duty station, however, as early as 0630 in order to attend required meetings (Commander's Call), special training, or to properly prepare for the first appointment of the day, etc. Interns, similar to other medical professionals, do not leave at the end of the duty day, but work until required clinical procedures and documentation is completed to the satisfaction of their clinical supervisors. It is not uncommon for interns to work past 1800 on some evenings in order to complete these responsibilities.

Consistent with Graduate Medical Education policy, no psychology intern is allowed to work more than 80 hours per week. A survey of past intern duty logs found that our Psychology interns worked, on average, 45-50 hours per week.
Annual Leave/Convalescent Leave
Service members earn 30 days of Annual Leave or Vacation each year. However, due to
the very substantial amount of clinical training that must be covered during the internship
year, psychology trainees are eligible to miss only 14 days from the designated training
program (4 days of which can only be devoted to dissertation defense if the dissertation
defense and manuscript acceptance has not occurred before 1 Feb).

A day away from training is any day on which the Intern is absent when others are in
training. Days away from training include annual leave/vacation days, convalescent/sick
leave, and professional conferences. Federal holidays and military “family days” are not
counted as days away from training since no training occurs for anyone at that time.

Interns may carry forward (accrue) up to 30 days of Annual Leave into the new year but
many elect to take a significant amount of Annual Leave/Vacation following their
graduation from internship or in conjunction with their move to their next Air Force Base
assignment.

INITIAL ASSIGNMENTS AFTER GRADUATION

Although AF Interns do not complete internship until August, they frequently receive
information about their next assignment in the month of April. This assignment typically
will be scheduled to start in early September and will end at the conclusion of their Active
Duty Service Obligation (generally 36 months following graduation from internship).

The AF offers assignments at more than 70 locations in the continental U.S. and overseas.
Air Force Base locations can be found at: www.airforce.com/contact-us/base-locator/

All AF assignments are ultimately based on mission need. However, there are
opportunities to express preferences for geographic location and position specific duties.
The Assignments Officer for Clinical Psychology gives priority to matching up the
preferences of higher ranking AF Psychologists with AF requirements, but even new
internship graduates have occasional opportunities to serve outside the continental US.
In the last three years, WHASC has had graduates receive assignments to Germany,
England, Japan, and Alaska.
The Clinical Psychology Internship Program at Wilford Hall Ambulatory Surgical Center (WHASC) is based on a scientist-practitioner approach to understanding human behavior and providing psychological services. The purpose of the WHASC psychology internship program is to prepare competent psychologists to provide empirically-validated mental health care services to military members and their families and to provide effective consultation to military leaders on issues related to military members’ fitness for duty as well as risks to the public health of the local Air Force base community.

Wilford Hall Clinical Psychology Internship Training Model

The Psychology Internship Training Program at Wilford Hall Ambulatory Surgical Center is based on the scientist-practitioner model outlined in the Conference Policy Statement of the National Conference on Scientist-Practitioner Education and Training for the Professional Practice of Psychology (Belar & Perry, 1992) and further clarified by Belar (2000). We view the core meaning of "scientist-practitioner" as involving an integration of science and practice in all of the professional activities of a clinical psychologist. Our program trains interns to use a scientific approach to analyze clinical problems, and use the insights gained from clinical practice to inform and guide relevant empirical investigation.

We intend our training activities to produce "generalist" clinicians who use careful, critical thinking skills to apply scientific evidence to the practice of psychology. We expect trainees to base their clinical decision making and treatments on strong empirical evidence when it is available. This critical thinking combined with a reliance on empirical science helps trainees minimize the inherent bias present in all human thinking, promotes the use of the most effective clinical strategies for patient care, and encourages the advancement of psychology as a health care profession.

Wilford Hall Clinical Psychology Internship Training Program Goals

Goal 1: Graduates will be capable of working within a scientist-practitioner model of evidence-based practice.

Objectives:
A. Graduates will be competent in adopting a hypothesis-testing, self-critical approach to professional decision-making.

B. Graduates will understand and draw upon published research in conceptualizing cases, and in making professional decisions.

C. Graduates will demonstrate the ability to generalize the scientist-practitioner strategy in approaching, analyzing and understanding newly encountered problems and phenomena.

D. Graduates will engage in activities that are in support of active research.
Goal 2: Graduates will be competent in psychological assessment strategies and instruments as aids in psychological practice

Objectives:
A. Graduates will demonstrate expertise in using functional analyses and related cognitive-behavioral assessments emphasizing treatment progress and outcome across settings.

B. Graduates will demonstrate expertise in using psychological test results based on their established validity for improving clinical decision-making and treatment outcome for specified clinical issues.

C. Graduates will show skill in case conceptualization and making accurate DSM-5 diagnoses based on skilled information gathering from chart/history review, direct interviewing/observation and interpretation of psychological tests.

D. Graduates will be knowledgeable regarding accurate risk assessment and management of patients at risk for self-harm or harm to others (e.g., family violence, suicide, dangerousness, and related areas).

Goal 3: Graduates will be competent in using empirically-supported psychological interventions and treatments.

Objectives:
A. Graduates will be competent in drawing upon empirically supported concepts in conceptualizing cases and developing treatment plans.

B. Graduates will demonstrate competency in selecting, adapting, and implementing empirically-supported treatment strategies.

C. Graduates will demonstrate competency in the appropriate and flexible use of manual-based treatments.

D. Graduates will demonstrate awareness of strategies for intervening in disaster, trauma and related situations.

E. Graduates will demonstrate competency in addressing issues of "strength enhancement" in addition to models emphasizing pathology reduction.

F. Graduates will demonstrate competency in providing treatment with individuals and groups.
Goal 4 : Graduates will be competent in applying population health and community psychology concepts when conceptualizing, assessing and treating psychological problems.

Objectives:
A. Graduates will demonstrate competence in applying knowledge of the Air Force community’s structures and functions in carrying out their professional psychological practice.

B. Graduates will demonstrate competence in enlisting the support of community agencies and personnel in effectively discharging clinical responsibilities.

Goal 5 : Graduates will use knowledge of health care policies and military administrative practices within the Air Force to guide the delivery of patient care, force management practices and population health programs.

Objectives:
A. Graduates will show an understanding of how and where to find information regarding relevant AFI's and similar statements of regulations.

B. Graduates will show an understanding of productivity measures and their impact on managing clinical services in their own practice and the work of their supervisees.

C. Graduates will show an understanding of the importance of Air Force Instructions and other regulations guiding business and professional practice within the DoD health care system.

Goal 6 : Graduates will regularly analyze their own professional knowledge, skills, and attitudes and actively engage in professional development activities to enhance their professional competence to serve as professional role models/mentors, and make progress towards achieving professional psychology licensure as an independent health care provider.

Objectives:
A. Graduates will demonstrate an understanding that professional continuing education is a developmental process which requires a proactive and continuing commitment to skill enhancement and knowledge acquisition.

B. Graduates will recognize the limits of their education, training, and skills and will seek professional consultation when appropriate.

C. Graduates will demonstrate an awareness of personal and situational factors which may limit their professional effectiveness and actively seek to avoid such limitations. They communicate difficulties and request guidance or supervision as necessary and in a timely manner.

D. Graduates will actively engage in ongoing self-improvement and education to prepare oneself for serving as a clinical mentor/supervisor.
E. Graduates will demonstrate good awareness of the requirements for initial licensure.

F. Developing a personal plan with a specific timeline for acquiring their licensure to practice psychology as a health care provider.

**Goal 7:** Graduates will demonstrate an awareness of and sensitivity to the impact of individual differences (e.g., culture, gender, ethnicity, sexual orientation, religion, physical abilities, age) on clinical assessment and treatment practices.

Objectives:
A. Graduates will understand the impact of the military and Air Force cultures on the behavioral health of the individual.

B. Graduates will demonstrate a consideration of the impact of individual differences in their assessment, conceptualization, and treatment.

C. Graduates will demonstrate respect for all individuals, including peers, staff, supervisees and patients, regardless of their individual backgrounds.

**Goal 8:** Graduates will demonstrate appropriate professional conduct and ethical behavior.

Objectives:
A. Graduates will demonstrate awareness of how professional conduct and ethical practice influence individual patient care and practitioner effectiveness as well as the public respect for the profession of psychology.

B. Graduates will seek consultation from appropriate colleagues when questions about professional conduct or ethical practice arise and use that information to guide their clinical decisions and practice.

C. Graduates will demonstrate appropriate professional conduct and ethical practice in all aspects of their professional work.

**Goal 9:** Graduates will show proficiency and effectiveness in professional communications.

Objectives:
A. Graduates will be capable of writing clear, timely, and appropriately detailed reports, notes, and chart entries that are effective in supporting continuity of care by psychologists and other health care professionals.

B. Graduates will demonstrate the ability to orally communicate in a clear and professional manner with patients, colleagues, other professionals, and staff.
Our Medical Facility and Community

Wilford Hall Ambulatory Surgical Center (WHASC) is the largest outpatient surgery center within the Department of Defense. A national resource, Wilford Hall has provided complete medical care to military healthcare beneficiaries in the south central United States as well as specialized care to patients referred from all over the world. Prior to September 2011, Wilford Hall's patient care mission included more than 16,000 inpatient admissions and one million outpatient encounters per year. Beginning 15 September 2011, the patient care mission of WHASC was transformed.

In 1988, 1991, 1993, and 1995, the Defense Department executed base realignments and closures (BRAC) through a legally specified process. BRAC 2005 recommended (172 Med 10) the consolidation of Wilford Hall Ambulatory Surgical Center (WHASC) and Brooke Army Medical Center (BAMC) in San Antonio into one medical region with two integrated health care missions. Brooke Army Medical Center will emphasize trauma and emergency medical care plus inpatient tertiary care. The mission at Wilford Hall Ambulatory Surgical Center is now focused on primary care, outpatient clinics and specialty day surgery.

The WHASC mission is highly conducive to psychology training, stressing the importance of top quality medical services, prevention services, education and training, personal and professional growth, and partnerships with other military medical agencies in the San Antonio area.

Dynamic Training Environment

It is important to note that the AF operational and training environment is very dynamic. Thus, we are frequently adjusting our training activities to meet changing organizational and training demands and opportunities. Usually these changes are to improve the program; but at times mission demands may require the program to alter training schedules, reduce certain training components or remove specific minor components of the training program. Such changes would not affect the major components of the program.
1. Outpatient Mental Health Clinic (MHC) Rotation (4 months)
   - Initial Intake Evaluations and Therapy Cases
     - Individual
     - Group (psycho-educational format)
     - Couples
   - Crisis Assessment and Intervention (e.g., walk-in triages)
   - Psychological Assessment/Testing (e.g., security or medical board evaluations)
   - Psychological Assessment/Screening for Special Duties (e.g., Recruiter Duty; Survival Evasion Resistance Escape special duty, etc.)
   - Commander Directed and Fitness for Duty Evaluations (i.e., personnel evaluations)
   - Consultation to Leadership

2. Clinical Health Psychology Rotation (4 months)
   - Behavioral/functional Analysis of patients with chronic medical problems
   - Self-regulation strategies (Biofeedback, Relaxation, Stress Management)
   - Biopsychosocial management for chronic medical conditions
   - Consultations to medical providers
   - Health promotions (e.g., tobacco cessation and weight management)
   - Alcohol and Drug Abuse Prevention and Treatment (ADAPT)

3. Behavioral Analysis Service Rotation (1 month)
   - Crisis Assessment and Intervention for Air Force Basic Trainees (e.g., walk-in triages)
   - Consultation to Leadership

4. Assessment Rotation (1 month)
   - Includes both basic Psychological Testing and Neuropsychological Assessment

5. Primary Care Rotation at Family Health Clinic (1 month)

6. Clinical Investigation/Dissertation Rotation (1 month)
   Those who have completed their dissertation prior to when this rotation occurs on their schedule will have the opportunity to participate in an authorized elective (see below), including a clinical research project.

7. Elective Rotation (1 month)

8. Deployment Psychology (5 day course)
   “Topics in Deployment Psychology” course at the National Intrepid Center of Excellence (NICOE) in Bethesda, MD, sponsored by the Center for Deployment Psychology.
Other Required Activities

- **Continuity Clinic**
  
  Each intern is expected to carry at least one ongoing patient with a PTSD diagnosis, focusing on delivering the evidence-based treatment (EBT) of Prolonged Exposure or Cognitive Processing Therapy, and participate in a weekly PTSD Case Conference.

  In addition, each intern is expected to see at least one additional ongoing therapy patient each week as part of his/her "continuity clinic." These cases allow for therapy experiences that can carry over beyond individual clinic rotations. These cases are supervised by the intern’s Preceptor (see p. 27).

- **Research Seminar**
  
  Interns are required to participate in scientific experiential training activities. The goal of the Research Seminar is two-fold: 1: To provide interns with additional knowledge about the science of practicing psychology and 2: To provide an experiential opportunity to evaluate and analyze extant data.

  As a preliminary step in this training, interns are required to complete the Collaborative Institutional Training Initiative training (CITI training). Interns are provided access to, and training if necessary on, medical library resources (to include publication and database search programs) to aid them in conducting literature reviews.

  At the beginning of the training year, interns are placed on research teams. Each research team will be composed of faculty and 3-4 interns; this ‘vertical team’ approach permits a scaffolding of interns’ existing scientific knowledge across the training year. These integrated teams allow faculty an additional opportunity to model a scientist-practitioner approach to solving clinical problems.

  The Research Seminar meets weekly for one hour. During the first portion of the year, the research teams are involved in a readings discussion involving an array of topics from the philosophy of science, clinical decision making, and applied research design to name a few. The goal is to provide articles that discuss the application of science to the practice of psychology. During the remainder of the year the research teams will be in labs where they will work, in collaboration with staff, on evaluating research questions using existing data.

  All research teams are required to produce a manuscript, or presentation suitable for submission for publication or presentation at a national conference.

- **AF Community Psychology Activities**
  
  Interns will attend a variety of activities that provide exposure to typical experiences of psychologists in the Air Force at their next base assignment after internship, including a relationship enhancement workshop and participating in outreach activities for the base community such as through Unit Consultation Teams. Interns consult directly with leaders in the training wing and advise them on public health prevention strategies to address their high priority issues (e.g., marital separation/divorce rates, domestic
violence referrals, excessive weight/poor physical fitness, alcohol related incidents, tobacco cessation, etc.).

- **On Call Responsibilities**

  Approximately 2-3 weeks per year, psychology interns carry a cell phone after duty and on weekends to cover on-call responsibilities for the Family Advocacy Program. Duties include documentation of incidents requiring FAP services (e.g., domestic violence). Interns do not physically respond to the scene of any family violence, but will provide guidance to military leaders on the telephone regarding safety planning and case reporting. During the same on-call time periods, psychology interns also provide phone consultation to medical providers and Joint Base San Antonio Commanders and First Sergeants on mental health related matters. All on-call responsibilities are under the supervision of a credentialed staff member.

- **Program Characteristics**

  - **Scientific Focus**
    - Program focuses on scientific thinking and case conceptualization skills
    - Covers wide range of empirically-based practices (EBPs) including assessment, treatment, supervision, and community-based psychology
    - Applied research opportunities capitalizing on a wide array of options utilizing archival data clinical service opportunities

  - **Support Intern Autonomy and Professional Development**
    - All interns are given leadership responsibility in areas of program management and development
    - Supervision and other training forums include a focus on mentorship of both professional/clinical and officership issues

  - **Interdisciplinary Teamwork and Consultation**
    - Interns work closely with Psychiatry and Social Work Faculty and Psychiatry Residents.
    - Interns work closely with other medical specialties in the medical treatment facility, members of base agencies, and leaders in the AF community

  - **Working in a Joint Service Environment**
    - The Psychology Internships at WHASC and SAMMC in San Antonio share in some training activities during the year (e.g., Distinguished Visiting Professor visits, special didactics). This is important because the US military continues to engage in joint operations and our providers need to know how to work with patients and leadership from other military services.
    - Joint Base San Antonio - Lackland is home to a wide variety of joint military operations, including many enlisted technical schools attended by enlisted members of all branches of the armed forces. Interns work with patients from all uniformed services (Army, Navy, Marines, Public Health Service, and Coast Guard) and learn about each service’s unique culture, missions, and rules. Interns occasionally attend joint trainings with Army interns from Fort Sam Houston and with Air Force Psychiatry Residents.
TRAINING DESCRIPTION

As stated above, the internship year is currently divided into rotation segments. The Mental Health Clinic (MHC) rotation focuses on adult outpatient therapy and assessment, prevention and community consultation. The Clinical Health Psychology (CHP) rotation provides training in clinical health psychology, assessment/neuropsychology, and general medical consultation. The Behavioral Analysis Service rotation provides mandatory training in military applications of psychology, as well as the opportunity to seek specialty training in elective mini-rotations. The Primary Care rotation provides intensive training in cutting edge integrated behavioral health care in a busy Family Practice Clinic.

MENTAL HEALTH CLINIC ROTATION (4 months)

The Mental Health Clinic (MHC) rotation provides clinical training across a range of activities and a diverse spectrum of clientele with presenting problems ranging from situational and work-related stressors to acute psychosis (on occasion). Initial triage, safety evaluation and determination of patient disposition are conducted for all who walk-in on an emergency basis. The majority of daily clinical work is by scheduled appointments (initial intakes and follow-ups). The patient population is mostly active duty with a few retirees or family members (case-by-case for training purposes). Interns are supervised by a staff psychologist in providing individual, marital, and psycho-educational group therapies for both long and short-term care. Interns conduct manualized, cognitive-behavioral, educational/treatment groups. Case supervision focuses on empirically supported treatment, primarily from a cognitive-behavioral theoretical orientation.

Interns also conduct supervised formal psychological assessments (e.g., testing) of outpatients generated by medical referrals and via military-specific clinical evaluation processes such as medical discharge evaluation boards, security clearances, and “commander-directed” concerns about occupational performance. In conducting such evaluations, interns not only learn about various job requirements within the Air Force and how personnel are managed, but also how to conduct oneself ethically and professionally when analyzing, interpreting and acting as a command consultant or mental health "gate-keeper" regarding personnel issues. These training experiences provide excellent preparation for general duties within an Air Force setting or in a similar civilian, clinical/community setting.

CLINICAL HEALTH PSYCHOLOGY (CHP) ROTATION (4 months)

The four month Clinical Health Psychology rotation includes a variety of outpatient clinical health psychology experiences, including working on interdisciplinary programs (e.g., chronic pain management, diabetes management, weight management, and tobacco cessation). The rotation provides interns with the opportunity to evaluate and recommend treatment for medical and psychophysiological conditions in which the patient’s behaviors, emotions, cognitions, spirituality, culture or environment may be a significant determinant in the severity or extent of dysfunction. Empirically-based treatments (predominantly cognitive-behavioral interventions) are implemented to assist patients in modifying health compromising behaviors. CHP receives consultation requests from providers throughout the medical center to include the Sleep Clinic, Pain Clinic, Bariatric Surgery Clinic, Dietary Medicine, Internal Medicine, Primary Care,
Physical Therapy and Neurology. The CHP major rotation includes the opportunity to obtain training using biofeedback as an adjunctive treatment for appropriate conditions.

At WHASC, Psychology Interns become familiar with the Air Force’s Alcohol and Drug Abuse Prevention and Treatment (ADAPT) Program as part of their Clinical Health Psychology or Elective rotations. ADAPT includes a continuum of addiction treatment ranging from regular outpatient treatment, outreach/prevention, and intensive outpatient treatment.

**ASSESSMENT/NEUROPSYCHOLOGY ROTATION (1 month)**

The required assessment training consists of conducting psychological testing for active duty, family member, and retired adults referred to the service for cognitive testing. Interns will assist with assessment and reporting for neuropsychology consults. Referrals address a wide variety of presenting problems, with the most common being dementia, vascular injuries, psychiatric cases, and traumatic brain injury.

**BEHAVIORAL ANALYSIS SERVICE (BAS) ROTATION (1 month)**

Joint Base San Antonio - Lackland is known as “the Gateway to the Air Force” because it serves as the Air Force’s only Basic Military Training (BMT) site for all Air Force, Air National Guard and Air Force Reserve enlisted personnel. Lackland graduates 36,000 trainees from the 8½ week BMT course and provides advanced career training to another 38,000 technical school students each year.

Interns on the rotation shift their clinical focus from that of a medical officer providing health care to individual patients within a large teaching institution to the role of a clinician-consultant whose primary responsibility is to address questions of psychological fitness for duty with basic trainees, technical school students, or others considering a change to a career field requiring a specific psychological profile.

Interns gain experience in assessment for personnel decisions and in treating adjustment disorders, mood and anxiety problems. Interns are directly involved in decisions regarding recruits’ separation from the Air Force and hospitalization, and can expect to gain experience in assessment, triage, and crisis intervention with this late-adolescent population.

**PRIMARY CARE PSYCHOLOGY (1 month)**

The Air Force has long been regarded as leaders in integrated primary care. Interns spend four weeks immersed in a Primary Care Clinic providing behavioral health consultation services using population health principles. The predominant focus is consultation with Primary Care staff to aid in patient management for individuals with significant emotional or behavioral factors impacting health outcomes. Each intern has the opportunity to provide behavioral health assessments and services. Interns also aid Primary Care providers in co-management of the patient through regular follow-up consultations and feedback on issues impacting patient care. By working in primary care clinics, interns provide early intervention for patients suffering from life-style and stress-related disorders as well as more chronic medical conditions.
**CLINICAL INVESTIGATION/DISSERTATION (1 month)**

All Psychology Interns are expected to complete their doctoral dissertation or comparable requirement well before the end of their internship year. This is a primary responsibility. All interns are expected to work diligently on their dissertation during evenings and weekends until this requirement is complete. This mini-rotation offers an opportunity to intensely focus on dissertation tasks for four weeks. It has been especially helpful for those who need to accomplish substantial data analyses and/or writing tasks.

Those who have completed their doctoral requirement may elect to work on other research projects or complete an authorized elective in collaboration with a WHASC faculty mentor/supervisor. The Behavioral Medicine Department at Wilford Hall maintains a vibrant research program with many, ongoing funded projects. Interns may elect to work on one of these projects or develop one of their own in collaboration with a faculty mentor. As an example, one recent intern developed a research project that examined the relationship between stigma toward and career impact from mental health treatment on patients seen in the WHASC MHC.

All Interns on the Clinical Investigation/Dissertation Mini-Rotation will be expected to develop a training contract that specifies clear goals and objective for what will be done during the elective and to secure the agreement of a WHASC Training Faculty member to serve as their local institution Supervisor. Trainees working on dissertations will be expected to seek and receive expert content supervision from their Doctoral Program Advisors. The WHASC Faculty Supervisor will provide guidance and mentorship in appropriate goal setting, effective time management, working through obstacles, and logistics for accessing local resources (computer facilities, statistical software).

**ELECTIVES (1 month)**

Additional experiences are available in many of the required rotations, within temporal limits outlined below (approved elective rotations include CHP Plus, BHOP Plus, BAS Plus). Experiences in each setting will not be simply more of what is contained in the required rotation, but will be designed to support the advancement of the intern’s unique interests and skills. The specific training activities for each advanced/plus mini-rotation will be developed by the Rotation Supervisor and Training Director in consultation with the intern using pre-approved templates for the elective rotations. Each of these rotation options is available for 1 month.

Additional approved electives include Operational Psychology, Examination for Professional Practice of Psychology (EPPP) Preparation, Child/Adolescent Psychology, Motivational Interviewing, Small Base, and Neuropsychology.
DEPLOYMENT PSYCHOLOGY (5 days)

Interns are required to attend a five-day “Topics in Deployment Psychology” course at the National Intrepid Center of Excellence (NICOE) in Bethesda, MD. Interns receive in-depth training on deployment spectrum issues facing our service members, their families, and providers. This course is taught not only by Center for Deployment Psychology staff but also distinguished guest speakers with expertise in military behavioral health and deployment medicine.

The five-day course covers four broad topic areas identified as key to the care of service members and their families:

1. Deployment 101: Addresses the unique cultural and ethical demands that service members and behavioral health providers may experience while deployed in settings like Iraq and Afghanistan.
2. Trauma and Resilience: Addresses issues of psychological trauma and resilience particular to the experience of combat deployment. Participants learn evidence-based approaches to assess and treat combat operational stress, PTSD, suicidal behavior, sleep problems and sexual assault.
3. Behavioral Health Care of the Seriously Medically Injured: Introduces participants to issues that arise when providing behavioral health care to individuals suffering from serious medical injuries, with a focus on the identification and treatment of blast-related traumatic brain injuries and suicide.
4. Deployment and Families: Examines topics related to the impact of deployment, reintegration, and combat stress injuries on the service member and the family, with an emphasis on family function and resilience.

In addition to the four pillars listed above, a common course theme is the complicated dual relationship inherent to balancing the needs of the military with those of the individual service member. Ethical dilemmas, compassion fatigue, and new methods to combat stigma in any military environment are routinely presented from multiple perspectives throughout the course.

Please see the Center for Deployment Psychology’s website at http://deploymentpsych.org for more information.

DIDACTIC PROGRAM

The internship emphasizes a strong knowledge base for professional practice through an extensive Didactic and Readings Programs at the rotation and department level. Rotation supervisors incorporate research discussions on topics relevant to particular cases. Inclusion of didactic material provides integration of theory, science, and practice on issues of special relevance to active duty military patients.

The Outpatient Mental Health Clinic rotation didactics and readings are oriented to facilitating the development of evidence based therapy skills. Interns and rotation faculty meet weekly to discuss assigned readings, ethical issues and implementation of Air Force Instructions relevant to casework.

The Clinical Health Psychology (CHP) rotation didactics and readings focus on general topics pertinent to the field of clinical health psychology and disorders likely to be seen in
a CHP clinic. The first two weeks of the rotation is an orientation which includes training on health psychology concepts and practices (e.g., bio-psychosocial conceptualization, functional analysis, relaxation training, biofeedback, and consultation), training on the most common presenting problems (i.e., chronic pain, headaches and insomnia), basic concepts in consultation and neuropsychological assessment.

Didactics at the department level consist of an organized series of weekly classes on issues or topics that transcend rotational emphases. At WHASC, didactic sequences tend to stress advanced intervention and assessment strategies, current research in specific areas, the integration of general psychological principles and practices and special applications to military psychology.

In addition to “in-house” training, our program brings in two to three Distinguished Visiting Professors (DVP’s) each year. DVP’s commonly provide two presentations and spend informal time with the faculty and interns at lunches and dinners. A list of select DVPs at WHASC since 1994 can be found on the next page. Recent federal budgetary constraints have limited the DVP program in 2013-2014, but we are optimistic that the DVP program will continue in the 2016-2017 academic year.
<table>
<thead>
<tr>
<th>Presenter</th>
<th>Affiliation</th>
<th>Topic</th>
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<tbody>
<tr>
<td>Norman Anderson, PhD</td>
<td>APA</td>
<td>Health Disparities</td>
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<tr>
<td>Kelly Brownell, PhD</td>
<td>Yale University</td>
<td>Obesity Tx as Lifestyle Change</td>
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<tr>
<td>Thomas Borkovec, PhD</td>
<td>Penn State Univ</td>
<td>CBT and Anxiety Disorders</td>
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<tr>
<td>Roger L. Greene, PhD</td>
<td>Palo Alto University</td>
<td>MMPI w Healthy Populations</td>
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<td>Albert Ellis, PhD</td>
<td>Ellis Institute</td>
<td>Rational Emotive Therapy</td>
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<tr>
<td>Arthur Freeman, PhD</td>
<td>Univ of Pennsylvania</td>
<td>CBT: Depression Mgmt</td>
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<tr>
<td>Charles M. Morin, PhD</td>
<td>Laval University</td>
<td>BehavTreatment of Insomnia</td>
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<tr>
<td>Paul Retzlaff, PhD</td>
<td>Univ of N Colorado</td>
<td>MCM - Clinical Applications</td>
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<td>Theodore Millon, PhD</td>
<td>University of Miami</td>
<td>MCM Assessment</td>
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<tr>
<td>William Kelleher, PhD</td>
<td>Nova University</td>
<td>Optimizing Mental Health</td>
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<tr>
<td>Leanna Clark, PhD</td>
<td>Iowa State University</td>
<td>SNAP Appic to Outpatient MH</td>
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<tr>
<td>Christine Nezu, PhD</td>
<td>Allegh U of Hlth Sciences</td>
<td>Problem-Solving Therapy</td>
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<tr>
<td>Howard Garb, PhD</td>
<td>Pittsburg VA Medical Ctr</td>
<td>Moratorium for the Rorschach</td>
</tr>
<tr>
<td>Alan Marlatt, PhD</td>
<td>Univ of Washington</td>
<td>Relapse Prevention</td>
</tr>
<tr>
<td>Joseph Matarazzo, PhD,</td>
<td>Washington University</td>
<td>History &amp; Future of Psychology</td>
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<tr>
<td>Elizabeth Klonoff, PhD</td>
<td>Texas A &amp; M University</td>
<td>Competency Based Training</td>
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<tr>
<td>John Foreyt, PhD</td>
<td>Baylor College of Medicine</td>
<td>Emot Factors in Overeating</td>
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<tr>
<td>Thomas Oltmanns, PhD</td>
<td>Washinton University</td>
<td>Personality Disorders Assess</td>
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<tr>
<td>Douglas Snyder, PhD</td>
<td>Texas A &amp; M University</td>
<td>EBT for Relationship Problems</td>
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<tr>
<td>David Rudd, PhD</td>
<td>Baylor University</td>
<td>Assessment of Suicide Risk</td>
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<tr>
<td>Gerald Koocher, PhD</td>
<td>APA</td>
<td>Changes to Ethics Code</td>
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<tr>
<td>Leslie C. Morey, PhD</td>
<td>Texas A &amp; M University</td>
<td>PAI Advancements</td>
</tr>
<tr>
<td>Jeffrey Barth, PhD</td>
<td>Univ of Virginia</td>
<td>TBI: Key Assessment Issues</td>
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<tr>
<td>Patricia Resick, PhD</td>
<td>National Center for PTSD</td>
<td>CPT Approaches to PTSD</td>
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<tr>
<td>Robert Klesges, PhD</td>
<td>University of Tennessee</td>
<td>EBT for Tobacco Cessation</td>
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<tr>
<td>Kirk Strosahl, PhD</td>
<td>Mt View Consult Group</td>
<td>Marketing MH to Primary Care</td>
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<tr>
<td>Linda Sobell, PhD</td>
<td>Nova Southeastern Univ</td>
<td>Motiv Interviewing w Groups</td>
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<tr>
<td>Beverly Thorn, PhD</td>
<td>University of Alabama</td>
<td>CBT for Chronic Pain</td>
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<tr>
<td>Teresa Nezworski, PhD</td>
<td>Univ of Texas at Dallas</td>
<td>Mothers Who Kill</td>
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<tr>
<td>Kathryn Korslund, PhD</td>
<td>University of Washington</td>
<td>Dialectical Behavior Therapy</td>
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<td>Stephen Behnke, PhD</td>
<td>APA</td>
<td>Ethics of Interrogation</td>
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<tr>
<td>Frank Andrasik, PhD</td>
<td>Univ of W Florida</td>
<td>EBT for Headache</td>
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<tr>
<td>Scott Lilienfeld, PhD</td>
<td>Emory University</td>
<td>Successful Psychopathy</td>
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<tr>
<td>Janice Laurence, PhD</td>
<td>Temple University</td>
<td>Human Terrain Systems</td>
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<tr>
<td>Candace Monson, PhD</td>
<td>Boston VA Medical Ctr</td>
<td>Conjoint Treatment of PTSD</td>
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<tr>
<td>Martin Antony, PhD</td>
<td>Ryerson University</td>
<td>EBT: Anxiety and Perfectionism</td>
</tr>
<tr>
<td>David Riggs, PhD</td>
<td>Unif Svc Univ Health Sci</td>
<td>EBT: Prolonged Exposure</td>
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<tr>
<td>Yossi Ben-Porath, PhD</td>
<td>Kent State</td>
<td>Using the MMPI-RF</td>
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<tr>
<td>Erin Bigler, PhD</td>
<td>Brigham Young University</td>
<td>Neuroimaging/Neuropsychology</td>
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<tr>
<td>Daniel Taylor, PhD</td>
<td>Univ of North Texas</td>
<td>CBT for Insomnia (CBTi)</td>
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<tr>
<td>James Pennebaker, PhD</td>
<td>Univ of Texas</td>
<td>Expressive Writing</td>
</tr>
<tr>
<td>Laura Miller, PhD</td>
<td>RAND Corporation</td>
<td>Resilience in the Air Force</td>
</tr>
<tr>
<td>Carol Falender, PhD</td>
<td>UCLA</td>
<td>Clinical Supervision</td>
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<tr>
<td>Dick Bootzin, PhD</td>
<td>University of Arizona</td>
<td>Behavioral Sleep Medicine</td>
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</tbody>
</table>
EVALUATIONS

The process of evaluation has two components: (a) measurement of intern performance, and (b) evaluation of the internship program.

Trainee Performance Evaluation

The faculty strives to give prompt, descriptive feedback to trainees orally and in writing. This allows trainees to have the opportunity to adjust their efforts and learning strategies to maximize their overall skill acquisition. Regular feedback in this manner ensures no trainee is surprised by ratings or comments made on the formal written evaluations provided every 2 months.

Interns are provided with written feedback about their performance and standing in the training program from the training faculty at least six times during the year (at midpoint as well as endpoint of rotations with duration of 2 months or more). Competency on designated clinical skills and professional behavior is rated using a comprehensive evaluation measure. In addition to faculty ratings using the comprehensive evaluation measure, intern competency is also assessed using a competency evaluation rating form (CERF) on the Primary Care rotation, and evaluations/feedback from patients, mental health technicians, peers, individuals they supervise, and the interns themselves at numerous points throughout the training year. Additional competency assessment tools that are available include, case presentations, business plan performance statistics, and performance on EPPP practice tests. By the end of the training year, interns are expected to earn satisfactory ratings on relevant evaluation items for successful completion of the program.

Evaluative information on the intern’s progress will be provided to the Director of Training at the educational institution of record. Performance Evaluation data may be carried forward into the final Training Report that documents successful completion of internship requirements and it becomes part of the intern’s military personnel record.

Training Program Evaluation

Interns have multiple avenues for providing informal feedback about the training program. They are encouraged to speak with their Chief Intern, Rotation Supervisor, Preceptor, or the Training Program Director about important issues.

Formal feedback about the program is collected from Interns in the form of written evaluations of faculty serving as supervisors and preceptors at the midpoint and endpoint of training. A comprehensive survey covering the major features of the training program is also completed in the latter portion of the year. This information is then summarized and formally considered by the faculty in a day-long workshop attended by all program members.
SUPERVISION

All AF Psychology interns receive abundant opportunities to develop their professional skills through direct observation of expert faculty delivering clinical services and through mentoring and supervision experiences that occur during every rotation.

At WHASC, each intern receives individual supervision from Rotation Supervisor(s) and from a Faculty Preceptor who serves as their mentor for the entire internship year. Rotation Supervisors provide assistance with rotation specific casework, patient evaluation, treatment planning, therapy implementation, administrative issues and development of group therapy skills. The Preceptor is responsible for the intern’s overall professional development including all issues relevant to the trainee’s growth and success as a Clinical Psychologist and Air Force Officer. Rotation Supervisors and Preceptors meet regularly to discuss trainee progress and they collaborate in preparing the formal evaluations that occur every 2 months.

FACULTY AND INTERN LISTS

We are happy to provide you with a list of internship core and adjunct faculty including their training information and affiliations, interest areas, and contact information. To request any of these lists, please contact the program at:

Wilford Hall Ambulatory Surgical Center
59 MDOS/SGOWV
Psychology Internship Program
Joint Base San Antonio—Lackland, TX 78236
(210) 292-5972
airforcepsychology@gmail.com
APPLICATION PROCEDURE

Contact one of the three AF Psychology Internship Training Directors and your nearest Air Force Health Professions Recruiter (AFHPR) for essential information regarding the application process. Contact information for each of the AF Psychology Internship Training Directors is available on page 31 of this brochure. Contact information for HP Recruiting is available at http://www.airforce.com/contact-us/recruiter-locator/ or call 1-800-443-4690, or if you have difficulty, request help from an Internship Training Director.

ESTABLISH ELIGIBILITY

✓ Completed/Passed Military Entrance Processing Station (MEPS) physical examination

✓ Certified as Ready for Internship by the Graduate Program’s Training Director

✓ Willing to serve for 4 years on Active Duty as an Officer in the United States Air Force

✓ Screened and qualified for a Commission as an Officer in the US military. Requirements include:
  o US Citizenship
  o Meeting requirements for health/physical fitness
  o Meeting standards for exemplary character

✓ Screened and qualified for a Secret level Security Clearance

✓ Good academic standing at an APA-accredited program in Clinical, Counseling, or Combined Professional Psychology

✓ Interview completed with one of the three AF Psychology Internship Training Directors (“Senior Consultant Interview”)

✓ Willing to submit to random drug testing through urinalysis

APPIC POLICY REGARDING INTERNSHIP OFFERS AND ACCEPTANCE

The Air Force Clinical Psychology Internship programs are members of APPIC and follow APPIC policy on internship offers and acceptances. We participate in the APPIC Matching Program for internship assignment. Details of the APPIC program and policies can be viewed on APPIC’s web site (http://www.appic.org).

APPIC’s mailing address is: APPIC Central Office, 17225 El Camino Real, Suite #170, Houston, Texas, 77058-2748. Their phone number is: 832-284-4080.

The USAF participates in the APPIC Match Day internship assignment process. For additional details about application procedures, visit www.appic.org, and navigate to the program entries for the USAF internships.
The Air Force Selection Board Process and Match Day

Selection for commissioning and training as an Air Force Psychology Intern is competitive. Successful applicants typically have outstanding records of academic achievement from well-respected academic institutions. They have obtained practica experiences that reflect a commitment to evidence based generalist clinical practice, and have demonstrated leadership skills in a variety of contexts.

After an applicant has completed all AF Recruiting screening procedures and is identified as eligible for selection, their complete application will be forwarded to the AF Recruiting Services at Randolph Air Force Base, San Antonio in preparation for the Selection Board to be held each January. The AF Psychology Internship Selection Board process includes the AF Internship Training Directors and the Psychology Consultant to the Air Force Surgeon General. Those who are ranked above the designated cut-off point will be selected as ELIGIBLE FOR RANKING on the APPIC Match Day. Training Directors will then independently review and determine rankings for the respective AF internship sites.

While applicant information is reviewed by all three Training Directors as part of the Selection Board process, each Training Director uses the list of those applicants selected as ELIGIBLE FOR RANKING to privately construct their rank ordered list that will be submitted to the APPIC Match.

If an applicant is interested in completing an Air Force Psychology Internship, and they are willing to go to any of the three sites, we strongly encourage them to rank all three sites. The APPIC Match Numbers for each AF Psychology Internship site is shown in the table below.

<table>
<thead>
<tr>
<th>United States Air Force Psychology Internship Site</th>
<th>APPIC Match Number</th>
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<tbody>
<tr>
<td>Malcolm Grow Medical Center</td>
<td>134311</td>
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<tr>
<td>Wilford Hall Ambulatory Surgical Center</td>
<td>158911</td>
</tr>
<tr>
<td>Wright-Patterson Medical Center</td>
<td>151411</td>
</tr>
</tbody>
</table>

Additionally, applicants should be sure to make personal contact with the Training Director at each of the USAF sites where the applicant hopes to match.

**IMPORTANT!** In addition to the standard APPIC application process, applicants must work with a USAF Health Professions Recruiter to complete relevant military application procedures. This process is highly involved and can take several months. Interested applicants are encouraged to contact BOTH an Internship Training Director AND an HP Recruiter as soon as possible.
To reiterate, please note there are actually two application processes, a military process and a psychology process. The military process is carried out through the Health Professions recruiter and culminates in the Selection Board, described above. The psychology process is at the individual internship site level and culminates in each Training Director ranking applicants for their own site. Therefore, in addition to completing the procedures directed by a Health Professions recruiter, applicants should insure that they select each of the individual AF internship sites they are interested in by entering the internship’s code number in their online AAPI application.

As part of the online AAPI materials (which include the AAPI, curriculum vitae, copies of graduate transcripts, and three letters of reference from individuals familiar with your clinical and academic skills), applicants must address topics relevant to assessing Air Force leadership potential. Specifically, applicants must answer the items of the Psychology Applicant Questions Form (pp. 35) in bullet format in their cover letter. This information is used to assess suitability for Commissioning as an Air Force Officer and will be reviewed at the AF Psychology Internship Selection Board.

On occasion, the APPIC internet application program malfunctions and does not allow the internship site to review all of the application materials. Applicants should send AF Training Directors a courtesy email when they have submitted all parts of the application and notify the Training Directors by email when they believe their electronic application is complete through APPIC. This will alert the Training Directors to download the respective application and to review it for completeness/missing items. The WHASC Clinical Psychology Internship Application deadline is 1 Dec 2015.

Please note that our program Interview Day is “by invitation only.” Thus, the earlier you turn in your application, the more likely you can be considered for attendance at either of our Interview Days (usually held in early December and January). Please call an AF Internship Training Director if you have any questions or uncertainties about this somewhat complex process.
TRAINING SITES

While all three internship programs hold to the same standards and goals, each has its own distinctive location, character and emphases. Information about each site can be obtained from the Director of Training at that facility and (if invited) by making plans to attend an Interview Day Event at the Training Program:

Lt Col (Ret) Ann Hryshko-Mullen, Ph.D., ABPP, CBSM
59 MDOS/SGOWV
Wilford Hall Ambulatory Surgical Center
2200 Bergquist Dr., Ste 1
Joint Base San Antonio—Lackland, TX 78236-9908
Voice: (210) 292-5972 FAX: 210-292-5944

Lt Col Robert Vanecek, Ph.D., ABPP
779 MDOS/SGOW
Malcolm Grow Medical Center
1050 West Perimeter Rd
Andrews AFB MD 20762-6600
Voice: (240) 857-9940/8942 Fax: (240) 857-8112

Lt Col Kirk Rowe, Ph.D., ABPP
88 MDOS/SGOW
Wright-Patterson Medical Center
4881 Sugar Maple Drive
Wright-Patterson AFB OH 45433-5529
Voice: (937) 257-1363/6877 Fax: (937) 656-1192
APPLICATION INSTRUCTIONS

1. Complete all parts of the on-line APPIC Standardized Internship Application Form: www.appic.org

2. Using the on-line process request official transcripts of all graduate level courses.

3. Arrange for a minimum of three supporting letters from your professors, program directors, supervisors or others familiar with your psychological skills, academic training, or supervised clinical experiences. General “character references” may supplement, but do not replace letters addressing your specific skills and training. If a letter is used to supplement the Certification by Program Director (Item 5), this may count as one of the three required letters. These letters should be completed using the on-line process.

4. Submit Curriculum Vitae, listing honors, publications/research experience, clinical experiences, and other information relevant to your training and performance in psychology via the on-line application process.

5. Submit a cover letter that in addition to your introduction also answers in bullet format the AF Psychology Applicant Questions (see pp. 35) via the on-line application process.

6. The Air Force Health Profession Recruiter must submit your complete recruiting package (including but not limited to, medical examination documents, credentials and background check information, etc.) to the USAF Accessions Selection Board.

Be sure to check with your recruiter regarding specific due dates. A phone call to any Air Force recruiting station or 1-800-443-4690 will yield the exact location, phone number, etc., of the Health Professions recruiter you should contact. An on-line locator service is also available at http://www.airforce.com/contact-us/recruiter-locator/. The Health Professions recruiter is critical to the application process, providing information and assistance to you throughout the application process. The Health Professions recruiter’s job is to help you complete the screening process to determine your eligibility to serve as an Air Force officer. You must complete and pass the HP Recruiting Services screening process in order for the AF Psychology Internship Selection Board to consider you for an AF Psychology Internship.

7. The entire application process usually takes at least 60 days and can take significantly longer. It is best to start as soon as possible. During this process, your recruiter should be in regular contact with you to ensure that all screening procedures, documents, etc. are processed in a timely manner. Do not let more than about 2 weeks go by without contact from your recruiter. Finally, if you encounter problems with this process, please contact one of the AF Internship Training Directors as soon as possible so that they can help you troubleshoot the difficulties.

8. At the AF Accessions Selection Board in mid-January, you will be selected as eligible or ineligible for an AF psychology internship from an Air Force perspective. From the eligible list, each individual site Training Director will submit his/her own preferences in rank order through the APPIC Match. Selection at this Board does not constitute selection by the internship program, but rather means you will be eligible for consideration by the AF internship programs. You will only be notified of the results of
the AF Internship Selection Board if you are determined to be ineligible for the AF.

When submitting your Match list, you must list each AF site you are interested in (in order of preference) separately.

9. Questions about the military application process and qualification as an Air Force officer should generally be directed to your Health Professions recruiter. Issues relevant to the profession of psychology or the specifics of the training programs should be addressed to the Director of Training at one of the AF internship sites. Training Directors are eager to work with strong applicants in determining whether our programs are well suited to your career plans and to offer any information you may need in planning this critical part of your professional education. You may call, e-mail, or write at any time.

10. The AF also requires an interview with one of the three Training Directors (referred to as the “Senior Consultant Interview”) as part of the general application process. All applicants will be interviewed; therefore, no specific interview notification is provided. Applicants should contact Training Directors to arrange an interview. While only one interview is required, applicants are encouraged to at least do a phone interview with the Training Director at each AF program for which they are interested in being considered.

11. Although the official AF deadline for application materials is 1 December, WHASC requests that the application materials also be submitted one week before interviewing with the Training Director and early enough to allow for an invitation to attend an Interview Day. The WHASC Internship Interview Day dates are announced each summer. At that time, in addition to seeing our program first hand, invited applicants receive interviews with the site faculty. At WHASC, such on-site interviews are not required for selection, but are strongly encouraged. Applicants who are invited to attend an Interview Day but are not able to visit and interview on the specified Interview Day dates can arrange different dates for a phone interview with the Training Director.

12. AF internship programs subscribe rigorously to APA standards for program content and APPIC Policy for notifying and accepting applicants. This internship site 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. Applicants are expected to support this Policy as well. As indicated above, a copy of the APPIC Policy should be available at their web site (http://www.appic.org).

13. See the Application Checklist for the WHASC Internship below for a summary of application instructions.
APPLICATION CHECKLIST FOR WHASC INTERNSHIP

Be Sure to Check for Changes in these Requirements

Note: Required items may vary, and the list below may not be comprehensive. Work closely with your recruiter to ensure that you submit requested materials quickly.

Materials to be submitted through the AAPI and to the Air Force Professions Recruiter

☐ AAPI
  o Official Transcripts of all graduate level courses
  o Three letters of recommendation
  o Curriculum Vitae
  o Cover Letter (include AF relevant topics)
☐ Medical examination documents*
☐ Health recruiter interview, other AF application forms*

*NOTE: HPSP students are not required to re-accomplish these final two items.

☐ In addition, be sure to arrange for a Senior Consultant/Training Director Interview
1. Why did you choose psychology as a profession?

2. Identify awards or public recognition that you have received for your academic accomplishments in your doctoral program.

3. Describe significant professional and community service activities you have engaged in during the past 5 years.

4. Describe notable leadership roles you have held and the impact you made (inside or outside of academia).

5. What do you believe are your most significant accomplishments?

6. Describe your short-term professional goals (1-5 years).

7. What type of professional life do you imagine for yourself 5-10 years from now?

8. Have you served in the military? Do you have close family or friends who have served as active duty military? What do you know about their experience?

9. What aspects of military service are attractive to you now?

10. What aspects of military service might present some difficulty or detract from the positive benefits you see?

11. Please discuss the benefits and limitations associated with military service in relation to your personal values.
APPENDIX A
AIR FORCE ASSIGNMENTS AROUND THE WORLD
## APPENDIX B

<table>
<thead>
<tr>
<th>Frequently Asked Questions</th>
<th>Page</th>
</tr>
</thead>
<tbody>
<tr>
<td>1  What do Air Force psychologists do?</td>
<td>38</td>
</tr>
<tr>
<td>2  What type of salary could a Psychology Intern expect?</td>
<td>38</td>
</tr>
<tr>
<td>3  Do psychologists deploy?</td>
<td>39</td>
</tr>
<tr>
<td>4  Are AF Psychologists required to attend Basic Military Training?</td>
<td>39</td>
</tr>
<tr>
<td>5  Are AF Psychologists required to cut their hair very short?</td>
<td>39</td>
</tr>
<tr>
<td>6  Are non-citizens eligible to serve as Psychologists in the USAF?</td>
<td>39</td>
</tr>
<tr>
<td>7  What are the height &amp; weight eligibility requirements?</td>
<td>40</td>
</tr>
<tr>
<td>8  What are the physical fitness requirements?</td>
<td>40</td>
</tr>
<tr>
<td>9  If I have a health problem or regularly take medication, am I ineligible to join the Air Force?</td>
<td>45</td>
</tr>
<tr>
<td>10 How bad can my vision be to qualify for the Air Force?</td>
<td>45</td>
</tr>
<tr>
<td>11 I have a rod, pin, etc. in my body; is this disqualifying?</td>
<td>45</td>
</tr>
<tr>
<td>12 What is the cut-off age for psychologists to join the Air Force?</td>
<td>45</td>
</tr>
<tr>
<td>13 Will traffic tickets make me ineligible to serve in the AF?</td>
<td>45</td>
</tr>
<tr>
<td>14 What law violations will disqualify me?</td>
<td>45</td>
</tr>
<tr>
<td>15 What is the Air Force’s policy on discrimination and homosexuality?</td>
<td>45</td>
</tr>
<tr>
<td>16 If I have used recreational drugs, am I disqualified to join?</td>
<td>46</td>
</tr>
<tr>
<td>17 What is the Air Force’s policy on tattoos?</td>
<td>46</td>
</tr>
<tr>
<td>18 What is the Air Force Active Duty Health Professions Repayment Program (ADHPLRP)?</td>
<td>46</td>
</tr>
<tr>
<td>19 Are applicants for the internship or the Health Professions Scholarship Program required to attend an Open House or complete an interview on site?</td>
<td>47</td>
</tr>
<tr>
<td>20 What happens after internship graduation?</td>
<td>47</td>
</tr>
<tr>
<td>21 Why do I need to complete another Senior Consultant Interview since I completed one last year when I applied for HPSP?</td>
<td>47</td>
</tr>
</tbody>
</table>
What do Air Force Psychologists do?

Our mission is the healthcare of our service members and their families. The majority of Air Force Psychologists work in outpatient clinics and hospitals much like our civilian counterparts. They spend the majority of their clinical encounter time, working with active duty military members or their family members. The most common diagnoses are similar to those seen in the civilian world (e.g., Adjustment Disorders, Anxiety Disorders, and Mood Disorders). Beneficiaries most commonly seek services because of relationship problems, although we also provide consultation specialty care to many with specific health issues.

Air Force Psychologists also provide screening and assessment for specific organizational needs. For example, they routinely evaluate active duty members who are getting ready to deploy to an active combat area. They also provide follow-up services for members when they return following deployment. In addition, they serve in important roles as consultants to military leaders on issues related to public health. They are active in developing community based prevention programs related to alcohol use, tobacco use, family violence, suicide and many other issues. There are many exciting opportunities for mental health program development and research.

What type of salary could a Psychology Intern expect?

Psychology Interns will hold the rank of Captain (O-3) and will receive a salary that is made up of a combination of Basic Pay (BP), Basic Allowance for Subsistence (BAS) and Basic Allowance for Housing (BAH).

BAS is meant to offset costs for a member's meals. This allowance is based in the historic origins of the military in which the military provided room and board (or rations) as part of a member's pay. This allowance is not intended to offset the costs of meals for family members. BAS for Officers in 2014 is $246.24 per month.

BAH is an allowance to offset the cost of housing when you do not receive government-provided housing. BAH depends upon your location, pay grade and whether you have dependents. BAH rates are set by surveying the cost of rental properties in each geographic location. Therefore, BAH rates in high-cost areas will be much greater than those in low-cost areas. Base pay is taxable but Basic allowance for Subsistence (BAS) and BAH are generally not taxable. For 2015, BAH for Captains (Officers-Grade 3) without Dependents in the San Antonio area is $1623.00 per month ($1659.00 with Dependents). BAS or monthly food allowance is $253.38.

The BP amounts for active duty officers can be found here: http://www.dfas.mil/dfas/militarymembers.html

A review of the Basic Pay Table for 2015 shows that O-3’s with less than 2 years of service are receiving $3912.60 per month.
**Do Air Force Psychologists deploy?**

In the current war context, Psychologists can expect to deploy one time for a period of 6 to 8 months during their four year tour of duty. During deployment, psychologists will work as health care providers for active duty military members in deployed areas such as Afghanistan, and nearby areas.

Most AF Psychologists consider their deployment a capstone experience in their professional career. They commonly describe feeling honored that they were able to help other military members at a time of great need.

**Are AF Psychologists required to attend Basic Military Training?**

No, medical officers attend Commissioned Officer Training at Maxwell AFB for a 5 week intensive training period. This training experience is designed to help ease the transition of candidates in the healthcare, legal and religious professions from the private sector into military life. You will begin with a training regimen designed to educate you in the ways of the military. This is an important time during which you'll develop into an officer and a leader. You will participate in physical conditioning, training, financial seminars and classroom studies.

**Are AF Psychologists required to cut their hair very short?**

All Officers are expected to be well-groomed and wear their hair in conservative styles. There are specific guidelines about hair length for male officers. Basically, male officers are expected to keep their hair trimmed in military type haircuts. Female officers can choose to wear their hair short or will have their hair pinned up in a professional manner so it does not fall below the bottom of the back collar (small pins, barrettes, etc. should be similar to hair color). Personal grooming standards can be found at: [http://www.au.af.mil/au/holmcenter/OTS/documents/PersonalGroomingStandards.pdf](http://www.au.af.mil/au/holmcenter/OTS/documents/PersonalGroomingStandards.pdf)

There are also defined standards for wearing jewelry. For instance, females may only wear stud-type earrings that are small and spherical (one per ear lobe). The full guidance on dress and appearance can be found at: [http://www.au.af.mil/au/holmcenter/OTS/documents/afi36-2903.pdf](http://www.au.af.mil/au/holmcenter/OTS/documents/afi36-2903.pdf).

**Are non-citizens eligible to serve as Psychologists in the Air Force?**

Only native-born or naturalized United States citizens are eligible to serve as Commissioned Officers in the United States Air Force.
AF Physical Fitness Requirements

What are the height & weight eligibility requirements?

Currently, all applicants, males and females, must meet the same height/weight requirement. See the chart below.

<table>
<thead>
<tr>
<th>Height in Inches</th>
<th>Maximum Weight</th>
<th>Minimum Weight</th>
</tr>
</thead>
<tbody>
<tr>
<td>58</td>
<td>131</td>
<td>91</td>
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<tr>
<td>59</td>
<td>136</td>
<td>94</td>
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<td>164</td>
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<td>79</td>
<td>244</td>
<td>168</td>
</tr>
<tr>
<td>80</td>
<td>250</td>
<td>173</td>
</tr>
</tbody>
</table>

An applicant that is 72 inches in height would meet the eligibility requirements as long as they weighed between 140-202 pounds. Applicants shorter than 58 inches or taller than 80 inches in height do not meet the height qualification regardless of weight. Similarly, applicants lighter than 91 or heavier than 250 pounds do not meet the weight qualifications regardless of height.

What are the physical fitness requirements?

All active duty military members must be physically fit and maintain this fitness throughout their career. Physical Fitness Assessment (PFA) is conducted at least twice a year and members must achieve a minimum competency to meet the minimum physical fitness requirements. Airmen who score "excellent" on their physical fitness test (90 or above in each category) take the test only once a year.

Under the rules effective 1 July 2010, the PFA consists of three events and one body measurement. There is a minimum requirement in waist circumference, sit-ups, pushups, a 1.5-mile run. Requirements vary depending on age (per AFI 10-248).

All events and the measurement are timed and/or monitored. You will have one minute to complete as many correct repetitions as possible for pushups and sit-ups. All event point
scores vary according to age and gender. The body composition score varies with gender, but not height or age.

To pass the PFA, you must achieve a total minimum score of 75 pts, the total from all three events and body composition measurement. Members will receive a score on a 0 to 100 point scale based on the following maximum component scores: 60 points for aerobic fitness assessment (1.5 mile run), 20 points for body composition (abdominal circumference), 10 points for push-ups, and 10 points for sit-ups. In addition, you must meet a minimum standard for each event and body composition measurement. The AF fitness program website http://www.afpc.af.mil/affitnessprogram/index.asp contains charts that show the performance required to achieve the minimum and maximum score in each of the events for each age group. In addition, the website will provide you with tips and methods that will ensure you are more fully prepared to handle the rigors of the PT program.

RULES OF THE PHYSICAL FITNESS ASSESSMENT (PFA)

SIT-UPS
✓ Arms folded across chest
✓ Feet flat on ground – no wider than hips
✓ Touch both elbows to their respective leg at the top of each repetition
✓ Both shoulder blades must touch ground
✓ Rest in up position for up to 5 seconds (don't touch legs with arms)

PUSH-UPS
✓ Hands should be shoulder width apart or narrower
✓ Keep body straight throughout exercise (except during rest periods)
✓ Arms must bend to a minimum of 90 degrees at the bottom of each repetition
✓ Lift body until arms are fully extended
✓ Rest in up position

1.5-MILE RUN
✓ Once the time has started it will not be stopped

BODY COMPOSITION MEASUREMENT
Use seamstress measurement tape to take measurement on bare skin
Locate the upper hipbone and the top of the right iliac crest.
The tape is placed in a horizontal plane around the abdomen at the level of the landmark
Ensure the tape is parallel to the floor and the tape does not compress the skin
Round measurement down to the nearest ½ inch. Take measure three times
Use the three closest measures, take the average, record this value as the abdominal circumference measurement

For more information, visit the Air Force Fitness Program webpage, http://www.afpc.af.mil/affitnessprogram/index.asp
CONDITIONING RECOMMENDATIONS

SIT-UPS
Take your self-test score and multiply it by three. This number will be the total number of repetitions you should perform every other day. Perform as many repetitions as you can; rest for one minute. Continue this process until you reach your total goal as determined above.

PUSH-UPS
Take your self-test score and multiply it by three. This number will be the total number of repetitions you should perform every other day. Perform as many repetitions as you can; rest for one minute. Continue this process until you reach your total goal as determined above.

AEROBIC RUN
At a minimum, we suggest running 20 minutes per day, three days per week for three weeks. After three weeks, increase your time to 30 minutes per day.

We strongly recommend following our Banded PT Program. To learn more about this training regimen, follow the link:
PT TRAINING PLAN

To determine your personal Training Plan:

1) Run the 1.5 mile portion of the PFB/D and record your time here ____________

2) Find the closest time to yours in the left-hand column in the chart to the right and look across the line to see your training times.

3) Based on the time you are running, the target time is the next appropriate level you should aim for. Trying to do too much too soon will only lead to injury.

4) Stay with your target training until you can run at your paces for a couple weeks, then run another 1.5 mi diagnostic and see where you are.

5) An optimal training week is described in the chart below. To improve your push-ups and sit-ups, do strength training (S) exercises that target the chest, shoulders, arms, and abs on your easy or non-running days.

<table>
<thead>
<tr>
<th>Week</th>
<th>A</th>
<th>B</th>
<th>C</th>
<th>D</th>
<th>E</th>
<th>Sat</th>
<th>Sun</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>3mi E+Strength</td>
<td>Strength</td>
<td>3mi Tempo</td>
<td>Strength</td>
<td>3x400m l</td>
<td>Rest</td>
<td>4-6mi L</td>
</tr>
<tr>
<td>2</td>
<td>3mi E+Strength</td>
<td>Strength</td>
<td>3mi Tempo</td>
<td>Strength</td>
<td>4x400m l</td>
<td>Rest</td>
<td>5-7mi L</td>
</tr>
<tr>
<td>3</td>
<td>3mi E+Strength</td>
<td>Strength</td>
<td>3mi Tempo</td>
<td>Strength</td>
<td>5x400m l</td>
<td>Rest</td>
<td>7-9mi L</td>
</tr>
<tr>
<td>4</td>
<td>3mi E+Strength</td>
<td>Strength</td>
<td>4mi Tempo</td>
<td>Strength</td>
<td>6x400m l</td>
<td>Rest</td>
<td>8-9mi L</td>
</tr>
<tr>
<td>5</td>
<td>3mi E+Strength</td>
<td>Strength</td>
<td>4-5mi Tempo</td>
<td>Strength</td>
<td>6x400m l</td>
<td>Rest</td>
<td>9-10mi L</td>
</tr>
</tbody>
</table>
The easy run (E) is a recovery run and should be a nice, easy jog for 20 to 40 minutes. This run allows your body to recover from the long run, while still adding miles onto your week thereby getting your body used to running.

The interval workout (I) is run on the track. The difference between this and a tempo run is that a speed workout is faster and shorter. Do a 5-10 minute warm up jog and then do 1/4mi (400m) repeats. Run 1 lap at your interval pace, then jog 1 lap to rest, and repeat. Jog for 5-10 minutes to cool down and stretch.

The tempo run (T) is a hard, controlled run, simulating the effort of racing. Warm-up for 5-10 min, then run 1 mile at your tempo pace, walk a lap (400m) to recover, and then repeat for a total of 3-5 miles. End with a 5 min cool-down jog. Bands 7, 8, & 9 will run 8 minutes at tempo pace, walk 3-4 min recovery, and repeat 3-5 times.

The long run (L) is critical physically and psychologically to your training program because it builds endurance and overall cardiovascular fitness. It will make the 1.5 mile run seem short and easy.

The long run is usually on the weekend, so you have time to run the recommended miles. Shoot for the distance or sustained pace over 60-90 min. The long run is done at the same pace as your easy run.
If I have a health problem, or regularly take medication, am I ineligible to join the Air Force?

Your local Air Force recruiter has a general guideline of medical conditions that can render someone ineligible for entrance into the Air Force. The doctor at the Military Entrance Processing Station (MEPS) is the source for making a determination on the condition.

If you are interested in joining and are otherwise eligible, your local recruiter can have the medical records for your condition prescreened by the doctor at the MEPS for you to find a preliminary ruling in your particular situation.

How bad can my vision be to qualify for the Air Force?

You can have an eye refraction level of no worse than + or - 8.0. When applying for enlistment or commission, your vision will be fully evaluated when getting your pre-entry qualification physical. Individual jobs have stricter vision requirements in many cases.

I have a rod, pin, etc. in my body; is this disqualifying?

In these cases, the Military Entrance Processing Station (MEPS) medical section must evaluate. You will need to provide all medical documents pertaining to the injury to your recruiter and they will forward them for the first stage of the evaluation process.

What is the cut-off age for Psychologists to join the Air Force?

Psychologist applicants must be commissioned before their 35th birthday. Waivers may be available for some individuals up to 42 years of age.

Will traffic tickets make me ineligible to serve in the Air Force?

An excessive number of traffic-related law violations within a 365-day period could impact your Commissioning qualifications. It is best that you contact your local Air Force recruiter who is qualified to answer questions on your specific situation.

What law violations will disqualify me?

Law violations have an impact on qualifying for Air Force Commissioning. It is best that you contact your local Air Force recruiter who is qualified to answer questions on your specific situation.

What is the Air Force’s policy on discrimination and homosexuality?

- As a matter of Federal and military policy, the AF and AF psychology training programs fully adhere to the practices and procedures of the Equal Employment Opportunities Act in the selection of trainees and employees. The AF views diversity and equal opportunity as a vital part of providing patient care, creating a fair and respectful work environment, and ultimately maintaining a healthy and synergistic workforce. We are committed to fostering diversity through hiring and selection practices that conform to US law and regulation.
Current Federal law allows individuals to serve in the military regardless of their sexual orientation. We recommend you contact your Health Professions recruiter with questions regarding current law.

If I have used recreational drugs, am I disqualified to join?

In most cases, substance abuse is disqualifying. Your specific circumstances should be discussed with your recruiter for an accurate determination to be made.

What is the Air Force's policy on tattoos?

For Air Force members, tattoos and/or brands anywhere on the body that could detract from an appropriate professional image, or that are seen as prejudicial to good order and discipline, or as potentially bringing discredit to the AF, are prohibited in and out of uniform. Tattoos and markings that are judged as obscene or advocate sexual, racial, ethnic, religious discrimination are prohibited. Tattoos must cover 25% or less of visible skin.

Supervisors are given the authority to judge whether a tattoo or marking is appropriate or inappropriate. As custom, enlisted Airman more commonly are seen with tattoos; tattoos are rarely seen on officers.

What is the Air Force Active Duty Health Professions Loan Repayment Program (ADHPLRP)?

The purpose of the Air Force Active Duty Health Professions Loan Repayment Program (ADHPLRP) is to provide a direct accession incentive to maintain adequate numbers of commissioned officers of the armed forces on active duty, who are qualified in various health specialties within the Medical Corps, Nurse Corps and Biomedical Sciences Corps.

The ADHPLRP program is not funded every year. Funding varies based on the anticipated separations or need to retain experienced officers.

In the past, ADHPLRP participants have received reimbursement for the repayment of loans used to finance health profession education. Reimbursement has consisted of loan amounts for principal, interest, and reasonable educational and living expenses.

The maximum repayment in 2013 was $40,000.00, less tax liability. Payments are sent directly to the lending institution on behalf of the ADHPLRP participant.

Participants incur an active duty obligation (ADO) consisting of a minimum of two years, or one year of ADO for each annual repayment, whichever is greater.
Are applicants for the internship or the Health Professions Scholarship Program required to attend an Interview Day or complete an interview on site?

We do not require that you come here to interview or to attend our Interview Day. We will be happy to arrange a telephone interview at a time that is convenient in your schedule.

We strongly encourage invited applicants to attend the Interview Day to insure that you have all of the information you need about the strengths and limitations of our internship and the associated 4 year military commitment.

What happens after internship graduation?

Air Force interns graduate and then are assigned to serve as a mental health provider for the next 3 years at an Air Force Base where their skills are needed. Most new graduates receive assignments in the Continental United States.

Yr 1 Interns will be expected to complete and defend their dissertation during their internship year and receive the doctoral degree following internship graduation.

Yr 2-4 assignment to a second AFB (most likely in the US).

Yr 2 You will be expected to apply for and receive Licensure as a Psychologist. If you choose to apply in a state that does not require postdoctoral hours of supervised practice, you could be licensed in as little as 6-8 months following internship graduation. Currently, this would allow you to receive specialty pay (for being licensed) of up to $5,000 per year. Licensure also enables you to fulfill your AF clinical responsibilities without co-signatures on clinical documentation. You will continue to receive postdoctoral supervision and mentorship so that you will have the postdoctoral supervision hours should you wish to apply for licensure in another state later.

You generally stay at the same AFB but you may be assigned additional (or alternate) leadership responsibilities as your time on station increases.

During these 3 years, it is likely that you will deploy once to an active conflict area. This deployment would likely involve two parts. The first part is preparatory training for the deployment and commonly lasts about 2 months. The second part, the deployment itself, typically lasts another 6 months. At this time, deployments for psychologists typically involve about 8 months away from home.

Why do I need to complete another Senior Consultant Interview since I completed one last year when I applied for HPSP?

The Selection Process for HPSP, Selection for an AF Internship, and Selection for Wilford Hall as your specific internship training location are each separate processes.

The Armed Forces Health Professions Scholarship Program (HPSP) is awarded to applicants to cover tuition, fees, and living expenses in exchange for a commitment to serve on active duty in the military. However, HPSP scholarships do not guarantee acceptance into the internships.
The senior consultant interview is necessary to clarify that the scholarship awardee still meets AF standards, is progressing appropriately in training, and is the best candidate to continue in AF training and service. You will be competing with all those that are applying this year for an AF internship. Of course, we selected you for the HPSP because we saw you had great potential, but this does not mean we have agreed to select you for internship. We are very serious about abiding by all elements of APPIC and the Match rules.

HPSP Scholars who are selected for a psychology internship at one of the AF’s three APA accredited internship sites, will begin their tour of duty at the beginning of the internship year and be obligated to three additional years after internship. HPSP Scholars who are not selected to an AF internship begin their tour of duty following completion of their civilian pre-doctoral internship. They are obligated to four additional years of service.

We encourage you to interview with every Training Director (and to apply to each site if you are serious about wanting to be an Air Force Psychologist.) These interviews can be conducted either via telephone or in-person, depending on Training Director availability and preference. The information you provide during this interview does play an important role in the Selection Board deliberations; it is summarized in a report and then presented during the Selection Board meeting.

We hope the FAQs have provided the information you were seeking. Please let us know if you have additional questions and we will try to insure that someone gets back to you with answers.
APPENDIX C

WHAT IS UNIQUE ABOUT THE WILFORD HALL INTERNSHIP

We are frequently asked what things make our site unique. The Air Force internships offer a number of exciting training opportunities but they are also uniquely shaped by their distinct missions and locations.

Lackland Missions: Joint Base San Antonio – Lackland (JBSA-Lackland) is home to the Air Force’s only medical wing (59th Medical Wing) and one of the largest combined medical training missions in the DoD, the San Antonio Uniformed Services Health Education Consortium (SAUSHEC). This consortium combines Wilford Hall, SAMMC (Ft Sam Houston), the University of Texas Health Science Center at San Antonio (UTHSCSA) and the Audie Murphy Veterans Administration (VA) Hospital. Therefore, interns have the opportunity to see a large and diverse patient population from multiple services and with many different medical comorbidities. Additionally, JBSA-Lackland is home to the Air Force’s enlisted basic training mission. This mission provides interns with a unique experience to see patients early in the military careers.

Below is a brief description of some training experiences that are unique to Wilford Hall:

1. PTSD/EBP Case Conferences. Our training program provides extensive training throughout the year via the PSTD and EBP case conferences. The case conferences focus on building competency within the clinical areas of trauma and evidence based therapies for various psychiatric disorders and conditions (i.e., depression, anxiety, substance use disorders, insomnia, and suicidality).

2. Research Seminar. Interns at our program have the opportunity to be a part of research team and gain valuable experience applying their scientific skills to address a variety of issues facing our military population. A majority of these projects have resulted in professional presentations and publications.

3. Dissertation mini rotation. This is uninterrupted time for 1 month, with private office space provided.

4. Behavioral Analysis Services (BAS). JBSA-Lackland is the training site for all enlisted members. Interns work with the trainees immediately in basic training with mental health issues. Interns see a wide variety of concerns and situations and get much greater understanding of life as an enlisted member. One very enlightening experience of this rotation is "A Day in the Life of an MTI" where interns shadow the military training instructors from the very beginning of the day to the very end.

5. On-Call Experience. Psychology interns carry a cell phone after duty and on weekends to cover on-call responsibilities for the Family Advocacy Program and provide phone consultation to medical providers and Joint Base San Antonio Commanders and First Sergeants on mental health related matters. As a USAF psychologist, there will likely be a time when you are the only psychologist at your base with no psychiatry colleagues. An ER doctor or commander may call you for advice, and the experience provided by these on-call shifts as an intern will be invaluable.
6. Operational Psychology: Interns progressing in training, with Training Director approval, may have the opportunity for a 2 week mini rotation in operational psychology. This would include didactic and participatory training in operations of the local SERE unit, focusing on supporting conduct after capture training as well as selection of special mission personnel. This course can be a great opportunity to learn how psychology is integrated with the operational/wartime military mission.

Location: The ambiance of San Antonio and the River Walk help set our internship apart from the programs at Wright-Paterson and Malcolm Grow Medical Centers.

The River Walk
San Antonio, Texas

San Antonio is a unique city and was rated the seventh largest city in the nation in 2012. It hosts a "big city's" wealth of resources, yet it somehow manages to retain much of the quality of a smaller town. The climate is typical of sunbelt cities: hot summers with moderate humidity, and gloriously mild, dry "winters." The city's gently rolling hills become more defined and rugged as one moves into the Texas Hill Country that begins at the city's northern border, and flatten to seacoast plains as one moves south and east toward the Gulf of Mexico. Wild flowers and trees are plentiful.

The medical and scientific community is large and active. The city is home to several teaching hospitals including those affiliated with the University of Texas Health Science Center, a comprehensive training facility that includes schools of medicine, dentistry, nursing, and others. These facilities, along with several colleges, military and VA medical facilities, and independent research institutes form the basis for San Antonio's status as a center for biomedical training, research and development.

Sunny. Relaxed. Friendly. Urban. Historic. Charming. There's tons to do and see, the weather is amazing, the people are welcoming, the cost of living is low, and the scenic Hill Country is just minutes away. We encourage you to visit San Antonio and find out for yourself why we're one of the country's most desirable cities for relocation.
Facts to Consider

San Antonio has:

- 1.38 million citizens (give or take a few)
- 224 days of sunshine annually
- 15 museums and 5 theme parks
- 20 million annual visitors
- 70 degree average temperature
- 10 days of Fiesta (a city-wide party with over 100 events)
- 5 historic missions and the Alamo
- “86” on the cost of living index (100 is the national average)
- 6 professional sports team including the NBA Spurs
- 12 accredited colleges and universities
- 176 city parks and recreation areas
- 8 malls
- 30+ golf courses
- The River Walk
- Countless restaurants, shops, clubs, movie theaters

Important Links to Learn More about San Antonio

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