



Children's Health System of Texas/Children's Medical Center Dallas
Postdoctoral Fellowship in Clinical Child Psychology
Degree Conferral Timeline

Section 1 – To be completed by applicant

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| Name of Applicant: | |
| Name of Doctoral Program: | |
| Internship Completion Date: | |
| Anticipated Dissertation Defense Date: | |
| Anticipated Degree Conferral Date* | |

*This is the date printed on the graduate school transcript as the date of degree conferral, not the date that the program informally determines that all degree requirements have been met.

I agree that the above information is true to the best of my knowledge. I understand that, as outlined in the application requirements, offers for fellowship and enrollment in the fellowship program at Children's Health System/Medical Center are contingent on degree requirements being met no later than the end of August of the fellowship year. I also understand that if my degree is not conferred prior to the fellowship start date (i.e., listed on my transcript), I may not be eligible for licensure in certain states (including Texas), because I will not be able to obtain 12 months of supervised clinical experience. I will notify the program at Children's Medical Center as soon as I am aware of any possible deviations from the above timeline.

Applicant (printed name & date)

Applicant (signature & date)

Section 2 – To be completed by the doctoral program Director of Clinical Training

I agree that the above timeline is realistic based on 1) the applicant's standing in the program, 2) his or her current progress toward goals for internship and dissertation completion, and 3) the process at the registrar's office at our university for conferring degrees. The applicant and I will notify the program at Children's Medical Center as soon as we become aware of any possible deviations from the above timeline.

Director of Clinical Training (printed name & date)

Director of Clinical Training (signature & date)