**Certificate of Internship Completion
Clinical Psychology Program (CLPS)**

As of [date], [student name] ([student ID#]) has satisfactorily completed the required pre-doctoral internship necessary for the awarding of a doctoral degree in clinical psychology or counseling psychology.

The internship was completed at:

[internship site]

The internship was completed over the time period: [Month/Day/Year] thru [Month/Day/Year]

Dated this [#] day of [month, year]

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Director of Clinical Training

Clinical Psychology Program

Department of Psychology

Marquette University