

COMPLETION ADDENDUM

This form should	be submitted to t	he Grad Office	along with	your signe	ed completion	of PhD
<u>requirements</u>						

Name:	Date:	
Forwarding Address		
House Number/Street		
City/State/Zip		
Country		
Personal E-mail:		

Contact information for a relative/individual who would be able to get in contact with you after graduation:

Name	
Relation	
Number/Street	
City/State/Zip	
Country	
Email	
Phone	

Using standard bibliographic citation format, please list all publications completed while a graduate student at Stony Brook (including any pending publications) and attach to this form.

Do you intend to submit future additional papers based on your dissertation or other works at Stony Brook? Yes \Box No \Box

 Employment status at graduation: Unemployed Have temporary position (please complete below) Negotiating for permanent position (please complete below) Arrangements completed for permanent position (please complete below)
Position title:
Employer Name
Address
Description of post-graduation position: P = Primary position S = Secondary position
I will be working: □ Full time □ Part time □ as a psychologist □ not primarily as a psychologist
Please complete what best describes your anticipated position(s):
□ Academic teaching (and research) P S Non-tenure track teaching at a □2 yr. college □4 yr. College □ Univ. Psych. Dept. □Medical school □Other Univ. Dept
Tenure track teaching at a2 yr. college4 yr. CollegeUniv. Psych. Dept.Medical schoolOther Univ. Dept.
Research: P S Postdoctoral fellow: Academic or psychology research institution (e.g. ETS,ORI) Governmental federal State local Corp./Business: theoretical Ontractual research/development/application project Not-for-profit institution or foundation
 Direct Practice P S Medical hospital Psychiatric hospital Community mental health center Corporate/business Private practice Private consulting Administrative/Managerial P S Other (Please describe)
□Other (Please describe)