

## Appendix F: Written Exam Assessment

### WRITTEN EXAM ASSESSMENT WORKSHEET

#### BACKGROUND:

The Training Manual notes that Examiners for the Written Examination look for the Candidate's:

- a. General knowledge of Jungian theory and related depth psychologies.
- b. Ability to articulate what they think and feel.
- c. Ability to utilize specificity in fleshing out their responses.
- d. How well they integrate clinical experiences, where appropriate, into their answers.

While not specifically grading on the candidate's writing skills, examiners look for:

- a. Clarity of expression and creative use of words and imagery.
- b. How well the candidate organizes and focuses their answers.

The Written Exam Committee compiles written feedback to the Candidates. The Written Exam Committee provides oral feedback to the Candidates on the first or second day of the Propaedeuticum Examinations. The Written Exam Committee submits the written feedback for the Candidates to the Propaedeuticum Exam Coordinator who then forwards the feedback to the Director of Training and Seminar Coordinators.

The Candidate must answer 3 of the 4 questions offered on the exam and the dream question.

A Candidate who passes their Propaedeuticum Exams is deemed ready to move into the control stage of training under supervision.

**NOTE TO EXAMINERS: THIS WORKSHEET IS DESIGNED TO SUPPORT YOUR GRADING PROCESS. IT BELONGS TO YOU AS AN EXAMINER. NO ONE SEES YOUR DOCUMENT EXCEPT YOU.**

<b>WRITTEN EXAM RUBRIC 8.23.20</b>					
<b>POINT SCORE</b>	<b>1 FAIL</b>	<b>2 FAIL</b>	<b>3 PASS</b>	<b>4 PASS</b>	<b>5 PASS</b>
<b>EXAM COMMITTEE RECOMMENDATION</b>	Recommend Candidate seek Consultation with an analyst who demonstrates writing skill.	Recommend Candidate seek Consultation with an analyst who demonstrates writing skill.	Recommend Candidate seek Consultation with an analyst who demonstrates writing skill.		
<b>TRAINING MANUAL CRITERION</b>					
<b>Knowledge of Jungian theory and related depth psychologies.</b>	The respondent is unable to define core Jungian and Jungian-related concepts clearly and cannot explain them in their own words.	The respondent is often unable to define Jungian and Jungian-related concepts clearly and has difficulty explaining them in their own words.	The respondent usually defines core Jungian and Jungian-related concepts by rote and can usually explain them in their own words.	The respondent most often defines core Jungian and Jungian-related concepts well enough and can most often explain them in their own words.	The respondent defines core Jungian and Jungian-related concepts clearly and can explain them in their own words.
<b>Ability to articulate what they think and feel.</b>	The respondent is unable to articulate clinical thoughts and express transference/ countertransference feelings.	The respondent is often unable to articulate clinical thoughts and express transference/ countertransference feelings.	The respondent can usually articulate clinical thoughts and expressing transference/ countertransference feelings.	The respondent is most often able to articulate clinical thoughts and express transference/ countertransference feelings.	The respondent is able to articulate clinical thoughts and express transference/ countertransference feelings.
<b>Ability to utilize specificity in fleshing out their responses.</b>	The respondent does not demonstrate the ability to utilize specificity in fleshing out their responses.	The respondent is often unable to demonstrate the ability to utilize specificity in fleshing out their responses.	The respondent usually demonstrates the ability to utilize specificity in fleshing out their responses.	The respondent is most often able to demonstrate the ability to utilize specificity in fleshing out their responses.	The respondent demonstrates the ability to utilize specificity in fleshing out their responses.
<b>How well they integrate clinical experiences, where appropriate, into their answers.</b>	The respondent ineffectively integrates clinical experiences, where appropriate, into their answers.	The respondent is often unable to effectively integrate clinical experiences, where appropriate, into their answers.	The respondent usually effectively integrates clinical experiences, where appropriate, into their answers.	The respondent is most often able to effectively integrate clinical experiences, where appropriate, into their answers.	The respondent effectively integrates clinical experiences, where appropriate, into their answers.
<b>COMMUNICATION</b>					
<b>Clarity of expression</b>	The response is not clear. Style and word choice are often inappropriate. Major errors interfere with meaning.	The response often unclear. Style and word choice are sometimes inappropriate. Errors interfere with meaning.	The response is usually clear. Style and word choice are usually effective.	The response is most often clear. Style and word choice are most often appropriate. Minor errors do not interfere with meaning.	The response is clear. Style and word choice are appropriate and contribute to meaning.
<b>Creative use of words &amp; imagery</b>	The response does not utilize words and imagery creatively.	The response often does not utilize words and imagery creatively.	The response usually utilizes words and imagery creatively.	The response most often utilizes words and imagery creatively.	The response utilizes words and imagery creatively.
<b>Organization</b>	The response is not organized.	The response often lacks organization.	The response is usually organized,	The response is most often well organized.	The response is organized.
<b>Focus of answer</b>	The response is not focused.	The response often lacks focus.	The response is usually focused.	The response is most often focused.	The response is focused.