



STATE OF OKLAHOMA
Board of Examiners of Psychologists
421 NW 13th Street, Suite 180
Oklahoma City, OK 73103
405/522-1333

The Oklahoma State Board of Examiners of Psychologists is partnering with the Association of State and Provincial Psychology Boards to create a Universal Application. This application will be retained in the ASPPB databank for future use as applicants wish to become licensed in other states or provinces. Once this form and application fee has been received by OSBEP, the applicant's information will be provided to ASPPB for further processing. ASPPB will contact the applicant to obtain additional application information.

Identifying Information

Full Name (first, middle, last) _____ Doctoral Degree _____
Area _____ Date Conferred _____ University _____ Dept: _____
Was your Doctoral Program APA accredited at the time your degree was conferred? Y _____ N _____
Master's Degree _____ Date Conferred _____ University _____
Name as it will appear on license _____
Previous names or aliases _____
SSN _____ Gender _____ Date of Birth _____ Are you a U.S. citizen? _____
Business Address _____
City _____ State _____ Zip _____
Business Telephone (_____) _____ Business Fax (_____) _____
Home Address _____
City _____ State _____ Zip _____
Home Telephone (_____) _____ Home Fax (_____) _____
Preferred Mailing/Contact Address: Bus. _____ Home _____
E-Mail Address _____

* This application must be typed

Do you hold any other licenses? _____ In which jurisdiction(s)? _____
Have you completed a minimum of 2000 hours of postdoctoral supervision with at least 75 hours of individual, face-to-face supervision? _____ If no, please complete the IPUS or PPUS form. If yes, please have your postdoctoral supervisor verify with ASPPB and complete the Health Service Psychologist application form.

There is a non-refundable \$400 application fee.
Checks and money orders must be made out to OSBEP and mailed with this application.
Two passport photos are also due at the time of application.

Please return this form along with two passport photos, \$400 licensure fee, Citizen's Affidavit Form and Application for IPUS/PPUS (if needed) or Submit Post Verification and HSP form to ASPPB.

Instructions for Required Affidavit:

All natural persons fourteen (14) years of age or older and present in the United States, applying for a license with the Oklahoma State Board of Examiners of Psychologists are required, by the provisions of 56 O.S. Supp. 2007 § 71, to provide the Board with verification of lawful presence in the United States by executing one of the Affidavits below before a notary public or other officer authorized to notarize affidavits under State law.

AFFIDAVIT VERIFYING LAWFUL PRESENCE IN THE UNITED STATES

Option 1 - Verification of Citizenship

Affidavit of

[Applicant's Name]

STATE OF _____) ss:

COUNTY OF _____)

_____, of lawful age, being first duly sworn, upon
[Applicant's Name]
oath states, under penalty of perjury, as follows:

I am a United States Citizen.

[Signature of Applicant]

Subscribed and sworn to or affirmed before me this ____ day of _____, 20____,
by _____.
[Applicant]

NOTARY

My Commission Expires: _____

(Seal)