

APPLICATION FOR HEALTH SERVICE PSYCHOLOGIST CERTIFICATION

Oklahoma State Board of Examiners of Psychologists

Psychologists who have completed consistent Training Programs, Internship/Residencies and Postdoctoral supervision experience in Clinical, Counseling or School Psychology are eligible for certification as a Health Service Psychologist (HSP).

Name		Doctoral Degree	Year			
	у					
Internshi	p	Area	Began Ended			
Sex	Birth date	Place	Are you a U.S.citizen			
Business	Address					
	State					
	ldress					
City	State	Zip	Phone			
I am, or h	nave been licensed as a Psychologist in the	he State(s) or Province(s) of:				
	Ouglification for Health Souries Payabalacist Contification					
Qualification for Health Service Psychologist Certification (Complete A or B)						
A	Board Certified-American Board of Pro Number	, ,,				
В	Two years of supervised experience in (Applicants	Health Services Psychology: must complete item 1 and item	m 2 or 3 below)			
1. Doct	oral Internship-Area		(Clinical/Counseling, or School)			
Direc	ctor of Training	Address				
City ₋		State	Zip			
2. Post-doctoral year at a site where Health Services were provided Supervising Licensed Psychologist Supervisor's major program area:						
Site		Address				
City _		State	Zip			



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3.	Post-doctoral Supervision in an academic or clinical research setting			
	If postdoctoral supervision is completed in an academic or clinical research setting , a minimum of two years required to fulfill the HSP requirements by performing the following activities. An Applicant is required to spen of his/her time performing the activities listed below.			
Pr	ovide approximate percentage of time engaged in the following activities:	%		
	All academic or clinical research setting applicants must include item a.			
a.	Direct service/multiple client contacts per week (minimum of five clients) including service in an agency or university-based clinic, or in a private practice under supervision. (minimum of 250 hours per year, for a minimum of two years, over the course of the postdoctoral supervision experience.)			
An academic or clinical research setting applicant may perform any of activities b, c or d.				
b.	Modeling and demonstrating clinical techniques, including assessment and therapy.			
c.	Supervision of clinical services, wherein the faculty supervisor assumes direct responsibility for supervisee's clinical work.			
d.	Conducting workshops for community groups or public presentations on mental health related topics.			
The undersigned, being duly sworn, deposes and says that the statements contained herein are true, complete, and correct to the best of his/her knowledge and belief; that he/she has not suppressed any information which might affect the application; that he/she is of good moral character, and will conform to the ethical standards and conduct of the profession; that he/she has otherwise met all statutory requirements, and believes him/herself eligible for certification and that he/she has read and understood this affidavit.				
	Signature of Applicant Date	_		
Plea	Oklahoma State Board of Examiners of Psychologists 421 NW 13 th Street, Suite 180 (405) 522-1333			