

Newfoundland and Labrador Psychology Board

P.O. Box 8275, Station A, St. John's, NL A1B 3N4

website: <http://www.nlpsychboard.ca>

Application for Courtesy Registration as a Psychologist

In

Newfoundland and Labrador Canada

(Revised November, 2014)

APPLICATION FOR COURTESY REGISTRATION AS A PSYCHOLOGIST
IN NEWFOUNDLAND AND LABRADOR, CANADA

Thank you for your interest in applying for courtesy registration as a Psychologist in the province of Newfoundland and Labrador, Canada. Please be advised that it is the applicant's responsibility to ensure all documentation on pages 7 & 8 is complete and forwarded directly to the NLPB.

Applications MUST be submitted on the NLPB application form. Applications are reviewed when ALL required documentation has been received by the Registrar. Please allow six weeks for the review process.

Please note NLPB reserves the right, under the Psychologists' Act 2005, to require additional information necessary to complete a comprehensive and thorough review of the application.

*The application fee is \$250.00 CDN and is payable by check or money order payable to the **Newfoundland and Labrador Psychology Board.***

Please note that courtesy registration:

- 1. Is for a single period of 30 consecutive days in one calendar year
 - a. If additional time is necessary in a calendar year, it would be necessary for the courtesy registrant to apply for full registration in the province.**
- 2. Upon approval of registration, it is required that courtesy registrants advise the Board, in writing, of the dates during which they are providing psychological services in the Province of Newfoundland and Labrador.
 - a. If there is any change in these dates, the courtesy registrant must notify the Board of these changes.**

The Application and documentation are to be forward to the following address:

Newfoundland and Labrador Psychology Board
P.O. Box 8275, Station A,
St. John's, NL
A1B 3N4

Inquiries may be made via telephone (709) 579-6313, via fax ((709) 753-6080 or by e-mail to registrar@nlpsychboard.ca

SECTION 1 – ALL APPLICANTS

A. Applicant Information

Name _____

Mailing Address: _____

Telephone: Home: _____ Bus: _____

E-Mail _____

B. Application status

I. Are you registered as a Psychologist in another jurisdiction? Yes No

a. If yes, please turn to **SECTION 3: “APPLICANTS REGISTERED IN OTHER JURISDICTION(S)”**

SECTION 2: APPLICANTS NOT REGISTERED IN OTHER JURISDICTION(S)

APPLICATION CHECKLIST FOR APPLICANTS NOT REGISTERED IN OTHER JURISDICTION(S)

1. Completed application form (Sections 1 and 2)
2. Official university transcripts requested to be sent directly to NLPB by issuing institution
3. Original Certificate of Conduct, issued within the last 12 months.
4. Reference Forms (3) to be sent directly to NLPB by referees
 - a. At least two references must be from Registered Psychologists.
 - b. References must have been completed within the last 5 years.
5. Signed Attestation
6. \$125 Application Fee

A. Education and Training

Applicants must submit official transcripts of all degrees awarded as listed in table below. These transcripts are to be sent DIRECTLY from the university to the NLPB.

INSTITUTION	DEGREE	DEPARTMENT	PROGRAM	DATE AWARDED

B. References

References are can attest to the applicant's quality of work in psychology. Two of these sources must be registered psychologists. Reference forms are attached to this application.

C. Attestation

Please review and sign the attestation on the following page..

APPLICANT ATTESTATION

Please read the following and sign below.

1. I have reviewed the current Canadian Code of Ethics for Psychologists, the NLPB Standards of Professional Conduct and the Practice Guidelines for Providers of Psychological Service. I am adhering to them and shall continue to do so. Yes No

2. Have you been found guilty of an offense under the criminal code in any jurisdiction?
If Yes, please append details on a separate sheet Yes No

3. Are there any current criminal proceeding(s) against you under the criminal code in any jurisdiction which are yet to be resolved?
If Yes, please append details on a separate sheet Yes No

4. Has any diploma, certificate or license, relating to the profession of psychology or another health profession, granted to you ever been suspended, revoked, or made subject to terms or conditions?
If Yes, please append details on a separate sheet Yes No

5. Have you ever had an application for registration, certification or licensing as a psychological services provider rejected?
If Yes, please append details on a separate sheet Yes No

6. Have you ever been convicted of professional misconduct, incompetence, or incapacity in relation to another health profession, or in another jurisdiction in relation to the profession of psychology or another health profession?
If Yes, please append details on a separate sheet Yes No

7. Are you the subject of a current proceeding for professional misconduct, incompetence, or incapacity, in relation to another health profession, or in another jurisdiction in relation to the profession of psychology or another health profession?
If Yes, please append details on a separate sheet Yes No

8. All statements made by me in all Sections of this application and all documents provided by me to the NLPB in support of this application are complete and correct to the best of my knowledge and belief. Yes No

9. I understand the NLPB may request any further information it may consider necessary in order to evaluate this application

Applicant Signature

Date

SECTION 3

APPLICANTS REGISTERED IN OTHER JURISDICTION(S).

APPLICATION CHECKLIST FOR APPLICANTS REGISTERED IN OTHER JURISDICTIONS

1. Completed application form (Sections 1 and 3)
2. Original Certificate of Conduct, issued within the last 12 months
3. Letter of Good Standing from current or last jurisdiction to be sent directly to NLPB by jurisdiction(s).
4. Copies of certification/documentation as noted below to be sent directly to NLPB by each issuing agency.
5. Signed Attestation
6. \$125 Application Fee

Applicants who are Registered Psychologists in other jurisdiction(s) MAY be fast tracked for registration with NLPB. Supporting documentation is required.

- A. Please identify jurisdiction(s) and licensure/registration number. Please provide copies of current license(s).

- B. Please identify if you are a member of or hold any of the following (check all that apply). Please provide documentation to confirm this information.

- CPQ from Association of State and Provincial Psychology Boards
- National Register of Health Service Providers in Psychology (NRHSPP)
- Canadian Register of Health Service Providers in Psychology (CHRSP)
- Graduate of APA or CPA accredited Doctoral Program in Psychology.

Please identify program(s): _____

Other: (please specify) _____

C. Applicants must submit the following documentation with their application.

- i. Copy of current Registration / License
- ii. Letter from current Psychology Regulatory Body attesting to Good Standing
- iii. Copy of certifications as noted in Section 3 above
- iv. Criminal Records check (ie. Certificate of Conduct), issued within the last 12 months.
- v. For applicants who are not registered in Canada or The United States, NLPB requires documentation that undergraduate and graduate program transcripts have been assessed as equivalent to the level and content of programs in Canada. This may be provided by the agency listed below. Costs of such are the responsibility of the applicant and must be forwarded directly to NLPB.

Comparative Education Service

University of Toronto

214 College Street

Room 202

Toronto ON M5T 2Z9

TELEPHONE (416) 978-2185

D. Attestation

Please review and sign the attestation on the following page.

ATTESTATION

Please read the following and sign below.

1. I have reviewed the current Canadian Code of Ethics for Psychologists, the NLPB Standards of Professional Conduct and the Practice Guidelines for Providers of Psychological Service. I attest that I am adhering to them and shall continue to do so.
2. I have not been found guilty of an offense under the criminal code in any jurisdiction.
If you have been found guilty of an offense(s), cross out this statement and initial. List any findings on a separate sheet of paper.
3. There is/are no current criminal proceeding(s) against me under the criminal code in any jurisdiction which are yet to be resolved.
If there is/are any current criminal proceeding(s), cross out this statement and initial. List any current criminal proceeding(s) on a separate sheet of paper.
4. I understand the NLPB may request any further information it may consider necessary in order to evaluate this application.
5. I certify that all statements made by me in all Sections of this application and all documents provided by me to the NLPB in support of this application are complete and correct to the best of my knowledge and belief.

Applicant Signature

Date

NLPB Office Use only

Documentation	Date Received by NLPB	Registrar Signature
Application Form		
Application Fee		
Certificate of Conduct		
Transcripts		
Referee Forms		
Letter of Good Standing		
Copy of Current Registration(s)		
Copy of Current Certification(s)		

Date of Presentation to NLPB _____

Decision of NLPB:

_____ Approved Full Provisional

Conditions of Provisional Registration:

_____ Not Approved

Reasons: _____
