



NATIONAL COUNCIL OF SCHOOLS AND PROGRAMS OF PROFESSIONAL PSYCHOLOGY

Application for Membership or Observer Status

Status for which you are applying: _____
(Member, Associate Member, or Observer)

Date of application: _____

Section 1 - General Information

Name of Academic Program: _____

Parent Organization: _____

Address: _____

Web Site Address (URL): _____

Telephone: _____ Fax: _____

Type of Administrative Organization: _____
(e.g., free-standing, university based)

Not-for-profit: _____ Degrees offered (e.g., Ph.D., Psy.D.): _____

Specializations offered (e.g., clinical, I/O): _____

Incorporated, Date, and State: _____

Regional Accreditation Status: _____

Accrediting Organization: _____

Authorized to award degrees (Date and State)?: _____

First Students Admitted (Year)?: _____ First Students Graduated (Year)?: _____

Chief Academic Officer (Name and Title): _____

Chief Administrative Officer (Name and Title): _____

Proposed Institutional Representatives:

Name: _____
 (Name, degree, position)

E-mail: _____

Name: _____
 (Name, degree, position)

E-mail: _____

Name: _____
 (Name, degree, position)

E-mail: _____

Section 2 - Questions Related To Membership Criteria

1. Is the program accredited by the American Psychological Association? _____
2. Is the training in *professional psychology doctoral training offered in a regionally accredited* institution of higher education? _____
3. Is the program clearly identified and labeled as a psychology program? _____
4. Does the psychology program stand as a recognizable, coherent organizational entity within the institution? _____
5. Is there clear authority and primary responsibility for the core and specialty areas? _____
6. Is the program an integrated, organized sequence of study? _____
7. Is there an identifiable psychology faculty and is a psychologist responsible for the program?

8. Does the program have an identifiable body of students who are matriculated in that program for a degree? _____
9. Does the program include supervised practicum, internship, field or laboratory training appropriate to the practice of psychology? _____
10. Does the curriculum encompass a minimum of three academic years of full time graduate study?

11. Does the curriculum include instruction in scientific and professional ethics and standards, research design and methodology, statistics and psychometrics, and require the demonstration of competence in biological, cognitive-affective, and social bases of behavior as well as in individual differences? _____
12. Is there formal course work related to professional skills and specialty areas? _____

Name, Title, and signature of individual completing application:

Signature: _____

Name (print or type): _____

Title: _____

Send completed application to:

Jeannie Beeff
Membership
919 W. Marshall Ave.
Phoenix, AZ 85013

Please include a current catalog and other descriptive material as well as the membership application fee of \$50.00.