**COLLEGE OF PSYCHOLOGISTS OF BRITISH COLUMBIA**

**SELF-DECLARATION OF COMPETENCE**

**IN AN AREA OF PSYCHOLOGY PRACTICE**

This completed form will be used by the Registration Committee to evaluate your self-declaration of competence in one of the eight recognized areas of psychology practice.

Name: _____ Registration Number: _____

I declare competence in the following area(s) (please circle up to two areas):

| | |
|---|---|
| 1. Clinical Psychology | 5. Health Psychology |
| 2. Neuropsychology | 6. Industrial/Organizational Psychology |
| 3. Counselling Psychology | 7. Rehabilitation Psychology |
| 4. Forensic/Correctional Psychology | 8. School Psychology |

I am declaring the new area #___ as my Primary or Secondary (please circle one)

Signature: _____ Date: _____

**1. Training**

In the space below (or in attached letter/documentation), provide a detailed description of your training to support your competence in the above area of competence.

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**2. Education**

In the space below (or in attached letter/documentation), provide a detailed description of your education to support your declaration of competence in your selected area of practice.

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**3. Experience**

In the space below (or in attached letter/documentation), provide a detailed description of your experience (including supervised experience) to support your competence in your selected area of practice.

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