

ASPPB/NATIONAL REGISTER DESIGNATED POSTDOCTORAL PROGRAM IN PSYCHOPHARMACOLOGY

TRAINEE CREDENTIALS FORM (TCF)

PROGRAM NAME: _____

PROGRAM LEVEL: Level Two _____

TRAINEES IN 20 _____

Level Three _____

Name of Trainee	Highest Degree Earned/ Degree Year	Institution Granting Degree	Program/ Major Field of Degree	Jurisdiction Where Licensed, Certified or Registered/ License Number	Licensure/ Certification/ Registration Title	Original Date of Licensure	Credentialed as Health Service Provider (HSP) at the State Level? If Yes, Please List Jurisdiction.	Credentialed as Health Service Provider (HSP) by the National Register of Health Service Providers in Psychology? If Yes, Please State Approval Date. If No, Please State HSP Qualification.
Heather Parker	Ph.D. 1995	Michigan State University	Clinical Psychology	Michigan #1052670 Indiana #2087456A	Psychologist Psychologist	01/15/1997 04/01/1998	Yes, Indiana	Yes 04/01/1997
John Oliver	Ph.D. 1978	University of New Mexico	Clinical Psychology	New Mexico # 999	Psychologist	01/15/1979	NO	NO Received doctoral degree and license before 1980
Joseph Watson	Psy.D. 1999	Argosy University - Honolulu	Clinical Psychology	Hawaii #500	Psychologist	04/15/2000	NO	NO Program Determination
SAMPLE								

HSP QUALIFICATION:

- Trainee received doctoral degree and obtained licensure before 1980
- Clinical Psychopharmacology program determined degree, internship, and postdoctoral experience appears to meet National criteria for HSP

Prepared by: _____
Date: _____