

National Register Internship Guidelines Compliance Worksheet

****This three-page form MUST be completed for each Psychology Internship Program that was NOT APA or CPA accredited – OR – APPIC listed at the time the applicant completed the internship. ****

Please TYPE all of your responses. If additional space is needed to document criteria, please attach response on a separate sheet of paper. Please send the completed worksheet to the National Register at:

FAX: 202-347-0550

-or-

Mail: National Register
1120 G Street, NW Ste 330
Washington, DC 20005

Name of Applicant:

Name of Internship Program/Facility:

Name of Supervisor and/or Training Director Completing Form and Email address:

1. An organized training program, in contrast to supervised experience or on-the-job training, is designed to provide the intern with a planned, programmed sequence of training experiences. The primary focus and purpose is assuring breadth and quality of training.

Explanation:

2. The internship agency had a clearly designated staff psychologist who was responsible for the integrity and quality of the training program and who was actively licensed/certified by the State/Provincial/Territorial Board of Examiners in Psychology.

Explanation (please provide the names of the psychologists):

3. The internship agency had two or more psychologists on the staff as supervisors, at least one of whom was actively licensed as a psychologist by the State/Provincial/Territorial Board of Examiners of Psychology.

Explanation (please provide the full names of supervisors):

4. Internship supervision was provided by a staff member of the internship agency or by an affiliate of that agency who carried clinical responsibility for the cases being supervised. At least one or more psychologists provided half of the internship supervision.

Explanation:

5. The internship provided training in a range of assessment and treatment activities conducted directly with patients seeking health services.

Explanation:

6. At least 25% of trainee's time was in direct patient contact (minimum 375 hours).

Explanation:

7. The internship included a minimum of two hours per week (regardless of whether the internship was completed in one year or two) of regularly scheduled, formal, face-to-face individual supervision with the specific intent of dealing with health services rendered directly by the intern. There must also have been at least two additional hours per week in learning activities such as: case conferences involving a case in which the intern was actively involved; seminars dealing with clinical issues; co-therapy with a staff person including discussion; group supervision; additional individual supervision.

Explanation:

8. Training was post-clerkship, post-practicum and post-externship level.

Explanation:

9. The internship agency had a minimum of two doctoral psychology interns at the internship level of training during applicant's training period.

Explanation (please provide the full names of interns):

10. Trainee had title such as "intern", "resident", "fellow", or other designation of trainee status.

Explanation:

11. The internship agency had a written statement or brochure which described the goals and content of the internship, stated clear expectations for quantity and quality of trainee's work and was made available to prospective interns.

Explanation (please be sure to ATTACH COPY of BROCHURE, if applicable):

12. The internship experience (minimum 1500 hours) was completed within 24 months.

Explanation:

I attest that the above information is true and correct to the best of my knowledge:

Signature of Individual Completing Form: _____ Date: _____

Email address: _____ Phone number: _____