Ohio Board of Psychology

FORM B

PROGRAM VERIFICATION OF NON-ACCREDITED, NON-APPIC MEMBER INTERNSHIP

To be completed by the Doctoral Program DCT or School Psychology Doctoral Program Coordinator and submitted directly to the Board

To the Doctoral Program Director of Clinical Training/Coordinator:

Ohio law requires that applicants seeking licensure under ORC § 4732.10(B)(4) must hold a doctoral degree in psychology or school psychology from a program accredited by the APA Commission on Accreditation or the CPA Accreditation Panel, designated by the ASPPB/NR Join Designation Committee, or approved by NASP. Said applicants shall have at least two years (3,600 hours total) of supervised training in professional psychology or school psychology, including a pre-doctoral internship of between 1,500 and 2,000 hours. This form used by the Ohio Board as verification that a **non-accredited/non-APPIC member internship was pre-approved as part of the doctoral degree requirements.**

Please print clearly

Name of Intern/Applicant for Ohio Licensure:
Name of Academic Institution:
Doctoral Degree Program: ❍ Clinical ❍ Counseling ❍ School ❍ Combined ❍ Other:
Director of Clinical Training (DCT)/Coordinator:
Name of Internship Facility/Training Site:
Director of Internship Training/Primary Internship Contact:
The internship was pre-approved by the DCT/Coordinator or designee: ❍ YES ❍ NO

Printed Director of Clinical Training (DCT)/Coordinator: _____

License# _____ State/Province _____

Signature _____

Date: _____

Fax this completed, signed form to 614-728-7081 or email to info@psy.ohio.gov

Thank you.